

IHP news 772 : Heavy Rain in Kenya & World Malaria Day

(26 April 2024)

The weekly International Health Policies (IHP) newsletter is an initiative of the Health Policy unit at the Institute of Tropical Medicine in Antwerp, Belgium.

Dear Colleagues,

Sophie Vusha (member of the [IHP editorial team](#)), wrote this week's short intro:

In recent weeks, a blessing of rain [has turned into pain for citizens in most parts of Kenya](#). Mid-March, long anticipated rain arrived and was – briefly - celebrated. However, soon most Kenyans were bemoaning the same rain, as floods have been [wreaking havoc](#) in many parts of the country. With Nairobi, the capital city and nearby counties being most affected, the raging waters have resulted in enormous destruction of property, life, and livelihoods. As heavy rains continue to pound my country, it's clear that deaths and waterborne diseases are also becoming more of a threat, and let's not forget mental health issues arising from this catastrophe. With the urban areas being worst hit, transportation has become chaotic due to damaged roads and infrastructure. Most people have been immobilized and some are unable to reach their offices or business places while others are forced to vacate their houses as the flash floods continue to fill through empty spaces. The [government is making efforts to evacuate people with support from non-governmental organizations](#) reaching those affected while urging people to move to higher grounds. Many people still need support for food and other needs as they have been totally displaced.

Against this rather dire backdrop, the celebration of [World Malaria Day](#) (scheduled for 25 April) has been underway. In order to further build upon gains made in malaria prevention practices, [the government has embarked on the distribution of insecticide-treated nets](#) in recent months. Even though a good initiative, this year it feels a bit 'flooded' by the rain stressors, and therefore people are clenching on the only hope that perhaps the skies will hold the waters, or a rare prayer for sunshine. So far, [the Rain God isn't listening much, though](#)...

In addition to **World Malaria Day**, this week's issue also focuses among others on **World Immunization Week** (and a new campaign, 'Humanly Possible'), wraps up the **Spring Meetings** in Washington DC with some more analysis & news snippets, covers this week's **IHR amendments round** and looks ahead to next week's **INB round** on the pandemic agreement in Geneva, the last rounds before the World Health Assembly in May - and against an increasingly worrying backdrop on Mpox & avian flu. Later today, a 'High-Level' event is also taking place in Paris, hosted by 'the One born & bred to host HL events' and whose inner calling it is to lay out a vision for the European Union (and by extension, mankind and the planet in general). There's also quite some 'access' related news this week, and the usual sections on Planetary Health (this week including 'Earth Day'), Global Health Governance, Financing, some vital **reads on Decolonizing Global Health**... and much more!

Enjoy your reading.

Featured Article

Decolonisation: Insider/Outsider Contradictions and Lived Experiences

Dr Keerty Nakray

“A just society is that society in which ascending sense of reverence and descending sense of contempt is dissolved into the creation of a compassionate society.”

— B.R. Ambedkar, [Annihilation of Caste](#)

On April 14, 2024, India commemorated the birth of B.R. Ambedkar, a Dalit jurist who was pivotal in drafting the Indian constitution. His personal experiences, shaped by his Dalit background, were instrumental in shaping a liberal constitution for a nation characterized by stark social disparities. His life and work testify to the power of lived experiences in driving systemic change. [Decolonisation, a term first coined by the German economist Moritz Julius Bonn](#), was initially used to describe the political liberation of colonies. Today, it is applied to interrogate the post-colonial impacts on intellectual thought, scientific endeavours, economic and political systems, and social and cultural hegemony. Influential works such as Frantz Fanon's [The Wretched of the Earth](#) have significantly contributed to this discourse on the binary contradictions between the colonised and non-colonised.

Reflecting on my journey as a woman researcher from a non-privileged backward caste background, I grapple with the complexities of navigating insider-outsider dynamics in my fieldwork. Seventeen years ago, during my PhD research on women living with HIV/AIDS and social policy, I confronted profound experiences of gender-based violence, sexual exploitation, excruciating care work, and extreme poverty among my participants in India. Despite my relative privilege as a white-collared middle-class woman, I recognised our shared struggles against societal injustices. These women's resilience and willingness to engage with my research despite their hardships challenged my preconceived notions and prompted introspection on my positionality within the research process. [I have been involved in reflective politics in my book, failing to make an impact on the lives of women with HIV/AIDS.](#) As a woman in a developing country, I lacked the networks and means to effect substantial change.

I have been critical of the South Asian anthropologists and social scientists working on marginalisation and have witnessed some unethical practices closely. For instance, [Saiba Verma's "Occupied Clinics"](#) has been criticised for not disclosing her father's role as an RAW officer. She has acknowledged, [“As an upper-caste and upper-class Indian citizen and subject, I have actively and passively internalised anti-Muslim racism my entire life. I am complicit in the colonization of Kashmir and other regions forcibly incorporated into the Indian nation-state.”](#) In the context of his newly published book, [Brown Saviors and their Others](#), Arjun Shankar acknowledged his male Tamil Brahmin privilege in his field locations. [Deepa Pawar](#), representing first-generation Nomadic Tribes (aboriginals), provides first-

hand accounts of reproductive child health and other issues of her people, an example of paradigm shifts in social sciences.

In my everyday life, I traverse contradictions between insider and outsider status; I have engaged with self-reflexivity in my location and recognize myself as someone who faces gender and caste-based discrimination daily. The reclamation process of intellectual space implies that the powerful elites should also be willing to relinquish their hold on it. Lived experiences are central to decolonisation; who tells the story is equally important. Living with oppression each day is different from theorising or objectifying it. In social sciences, the binaries of subject and object are blurred. It matters who tells the story; can someone's pain be objectified? We should move towards authenticity in social sciences. The politics of representation demands that we acknowledge the intuitive knowledge that emerges from firsthand experiences of oppression. Perpetrators of oppression have been complicit in undermining social justice, including the appropriation of intuitive knowledge. Offering a symbolic apology does not absolve us of our responsibilities.

Understanding these contradictions and valuing individuals' lived experiences within this context is crucial for a more nuanced and empathetic approach to decolonization. Listening to and learning from diverse voices is essential as we grapple with colonial legacies, particularly in India, where sexism, casteism, and ethnic conflicts intertwine with colonialism. Thus, asking difficult questions about elites' positionality within historical power hierarchies is necessary. Decolonization cannot be simplified into binaries like white versus non-white or west versus non-west. It entails engaging with India's deep-rooted legacy of casteism, or communalism, predating Western colonialism. The academic and policy sectors in the West and beyond must prioritize the inclusion of caste as a fundamental aspect of decolonization accountability from their colleagues and counterparts who hail from a caste and race-based society. Decolonization is happening right in our backyard, which implies that we are deeply engaged in our actions towards a compassionate society.

Acknowledgement: I would like to mention the inspiring woman [P. Kausalya](#), who started the Positive Women Network and supported my PhD research. Also, Lila (Sax) Sax dos Santos Gomes and Kristof Decoster, thank you for helping me articulate my thoughts.

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Highlights of the week

World Immunization Week (24-30 April)

“... This year, World Immunization Week celebrate[s] 50 years of [the Expanded Programme on Immunization \(EPI\)](#) – a collaborative initiative aimed at ensuring universal access to life-saving vaccines for everyone, everywhere.”

Global immunization efforts have saved at least 154 million lives over the past 50 years

<https://www.gavi.org/news/media-room/global-immunization-efforts-have-saved-least-154-million-lives-over-past-50-years>

“WHO, UNICEF, Gavi, and Bill & Melinda Gates Foundation launch “Humanly Possible” campaign to scale up vaccination programmes around the world during World Immunization Week 2024.”

“A major [landmark study](#) to be published by The Lancet ([preprint](#)) reveals that global immunization efforts have saved an estimated 154 million lives – or the equivalent of 6 lives every minute of every year – **over the past 50 years**. The vast majority of lives saved – 101 million – were those of infants....”

“... Of the vaccines included in the study, the measles vaccination had the most significant impact on reducing infant mortality, accounting for 60% of the lives saved due to immunization. This vaccine will likely remain the top contributor to preventing deaths in the future. **Over the past 50 years, vaccination against 14 diseases** (diphtheria, Haemophilus influenzae type B, hepatitis B, Japanese encephalitis, measles, meningitis A, pertussis, invasive pneumococcal disease, polio, rotavirus, rubella, tetanus, tuberculosis, and yellow fever) **has directly contributed to reducing infant deaths by 40% globally, and by more than 50% in the African Region.**”

“....The study found that **for each life saved through immunization, an average of 66 years of full health were gained** – with a total of 10.2 billion full health years gained over the five decades...”

“.... Released ahead of the 50th anniversary of the [Expanded Programme on Immunization \(EPI\)](#) to take place in May 2024, the study is the most comprehensive analysis of the programme’s global and regional health impact over the past five decades. Founded in 1974 by the World Health Assembly, EPI's original goal was to vaccinate all children against diphtheria, measles, pertussis, polio, tetanus, tuberculosis, as well as smallpox, the only human disease ever eradicated. Today, the programme, now referred to as the Essential Programme on Immunization, includes universal recommendations to vaccinate against 13 diseases, and context-specific recommendations for **another 17 diseases**, extending the reach of immunization beyond children, to adolescents and adults....”

“The study highlights that **fewer than 5% of infants globally had access to routine immunization when EPI was launched**. Today, [84% of infants are protected](#) with three doses of the vaccine against diphtheria, tetanus and pertussis (DTP) – the global marker for immunization coverage.”

“Today, WHO, UNICEF, Gavi, and BMGF are unveiling “[Humanly Possible](#)”, a joint campaign, marking the annual World Immunization Week, 24-30 April 2024. The worldwide communication campaign calls on world leaders to advocate, support and fund vaccines and the immunization programmes that deliver these lifesaving products – reaffirming their commitment to public health, while celebrating one of humanity’s greatest achievements. The next 50 years of EPI will require not only reaching the children missing out on vaccines, but protecting grandparents from influenza, mothers from tetanus, adolescents from HPV and everyone from TB, and many other infectious diseases.....”

Over 50 million lives saved in Africa through expanded immunization programme

<https://www.gavi.org/news/media-room/over-50-million-lives-saved-africa-through-expanded-immunization-programme>

“An estimated 51.2 million lives have been saved through vaccines in the African region over the past 50 years. For every infant life saved over that period, close to 60 years of life are lived, a new report by World Health Organization (WHO) finds. These achievements have been possible under the Expanded Programme on Immunization (EPI), a WHO initiative launched in 1974 as a global endeavour to ensure equitable access to life-saving vaccines for every child, regardless of their geographic location or socioeconomic status.”

“The report, which assesses the life-saving impact of vaccines, was released today at the start of this year’s African Vaccination Week and World Immunization Week being marked from 24–30 April under the theme “Safeguarding Our Future: Humanly Possible”. With the continuous support from WHO, UNICEF and Gavi, the Vaccine Alliance (Gavi) and many others, today most countries in the region provide antigens for 13 vaccine-preventable diseases, up from the initial six when the EPI was introduced....”

- For some more coverage & analysis, see HPW - [Immunisation Saved At Least 154 Million Lives Over Past 50 Years – WHO](#) With some coverage of a WHO press conference on Wednesday.

Also re new vaccine opportunities for meningitis, malaria and dengue. And as DRC declared mpox a health emergency a few weeks ago, finally the stage is set for vaccine rollout.

GAVI

Gavi CEO Sania Nishtar reflects on her recent visit to Central African Republic and Nigeria

<https://www.gavi.org/vaccineswork/gavi-ceo-sania-nishtar-reflects-her-recent-visit-car-nigeria>

“Gavi’s CEO discusses the importance of putting the countries that Gavi supports at the heart of everything the organisation does, and reflects on lessons and key outcomes from her recent trips to Central African Republic and Nigeria.”

“... I am particularly heartened that throughout the development of the Gavi's next five-year strategy, the Gavi Board have sought to ensure that the countries that Gavi supports have a major say in how the strategy is shaped. Over the past 12 months, countries have fed into the largest consultative process that Gavi has undertaken to date, and their recommendations will now join the comprehensive briefings prepared for the Gavi Board as they prepare to finalise the strategy in June.”

GAVI - Immunisation backsliding could kill 49,000 people: catch-up strategies could prevent 80% of those deaths

<https://www.gavi.org/vaccineswork/immunisation-backsliding-could-kill-49000-people-catch-strategies-could-prevent-80>

“Pandemic disruptions to life-saving vaccine programmes are costing lives, but most could be saved by targeted catch-up programmes. “

“.... Katy Gaythorpe at Imperial College London, UK, and colleagues published a study looking at the effect of pandemic-related disruptions on vaccine-preventable diseases in the April 2024 issue of [The Lancet Global Health](#). The researchers are part of the Vaccine Impact Modelling Consortium (VIMC), which Gavi funds along with the Bill & Melinda Gates Foundation and the Wellcome Trust.”

“This is the first large-scale assessment of the effect of disruption on immunisation programmes since the WHO-UNICEF estimates of national immunisation coverage were [released](#) in July 2022. ”
The reassuring news is that the analysis also showed that catch-up activities could avert approximately 79% of excess deaths between 2023 and 2030.”

“The study offered insight into where catch-up programmes would be especially impactful. The analysis showed that 70–100% of excess measles deaths could be mitigated in the South-East Asia, Eastern Mediterranean and African regions. For yellow fever, 50–60% of deaths could be averted in the African region.....”

Plos GPH - Health equity requires transformational change: Financial incentives based on worn-out market thinking will not deliver

Els Torreele et al;

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0003147>

“.... Multiple initiatives are underway to build manufacturing infrastructure in low- and middle income countries (LMICs). However, without proper attention to who owns and controls the production and underlying technologies, there is a risk that well-meaning donor investments reinforce market dynamics that favour a handful of major international producers over truly local efforts. This is particularly relevant for the African Vaccine Manufacturing Accelerator (AVMA), the new US\$ 1Bn financing instrument approved by the Board of Gavi, the Vaccine Alliance, in December 2023. Three AVMA design issues are cause of concern....”

And the authors conclude: “....Learning lessons from Covid-19, now is the time to build a conducive R&D and manufacturing ecosystem in the Global South, in which truly local companies have agency and are supported politically and financially to address priority health needs, fostering collective intelligence and collaboration over competition. **As new programmes such as AVMA and EU’s Global Gateway are designed, it is critical they target the needs of emerging local producers**, which include access to affordable capital to finance at-risk the technical work needed to adapt, optimize, and establish a regulatory dossier for submission to regulatory authorities and other push incentives. **Business-as-usual market dynamics will not deliver equity.**”

Global Fund Board meeting (Geneva)

Global Fund Board Welcomes Investments Towards Ending AIDS, Tuberculosis and Malaria; Expresses Concern Over Growing Needs From Polycrisis Amid Global Economic Pressures

<https://www.theglobalfund.org/en/news/2024/2024-04-25-board-welcomes-investments-ending-aids-tuberculosis-malaria-expresses-concern/>

(press release) “**The Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund) held its 51st meeting this week in Geneva, Switzerland.** While anticipating record disbursements this year, with an unprecedented pace of investment in resilient and sustainable systems for health (RSSH) and pandemic preparedness and response (PPR), **the Board repeatedly acknowledged the numerous challenges** – including climate change, conflict, displacement, geopolitics, the economic situation, and in particular, the erosion of human rights and gender equality – **that undermine the Global Fund partnership’s ability to end the three diseases by 2030.** The Board expressed the need to address the **inevitable impact that the current polycrisis will continue to have on the Global Fund partnership’s work to end the three diseases and strengthen systems for health....**”

PS: “....When facing multiple crises and economic pressure, joining forces with partners within the global health architecture is essential. It is in this spirit that **the Board endorsed the establishment of a joint committee working group to enhance collaboration and coordination with Gavi, the Vaccine Alliance, and the Global Financing Facility (GFF)....**”

“**Resource mobilization is on track for the current grant cycle and plans for the 2025 Replenishment fundraising conference are underway.** The Board acknowledged the **challenging and volatile Replenishment environment and the crowded international calendar** and emphasized the need for collaboration and coordination between global health partners to achieve mutual success.”

WB/IMF Spring meetings wrap up (with focus on WB’s UHC plan)

PS: for a **Devex analysis on Global Health Funding** (as discussed at the Spring meetings), see below.

WB - Spring Meetings 2024: Turning an Ambitious Vision into Impact

<https://www.worldbank.org/en/news/feature/2024/04/19/spring-meetings-2024-turning-an-ambitious-vision-into-impact?cid=ECR TT worldbank EN EXT>

Summary of main highlights of this year's IMF/WB Spring meetings – from World Bank point of view.

“New Partnership to Connect 300 Million to Electricity by 2030; **Expand Health Services to 1.5 Billion People**; New commitments up to \$11B and new financial tools.”

“From new partnerships and mobilization tools to bold plans to expand access to health services and electricity, **the World Bank Group's drive to become more ambitious and impact-oriented** was on full display at last week's Spring Meetings. **Under the theme “[Vision to Impact](#),”** the meetings showcased the progress the Bank Group has made in transforming itself, speeding up delivery, and working with partners to achieve greater scale.....”

PS: “.... Another Spring Meetings milestone was the **announcement of a new platform to strengthen and better coordinate the Bank Group's co-financing with other Multilateral Development Banks**. The **Global Collaborative Co-Financing Platform**, which will include 10 MDBs, consists of a [digital Co-Financing portal](#) to make it easier for partners to share information and identify co-financing opportunities, and a Co-Financing Forum, where participants can discuss best practices and common issues.....”

- And a link: ODI - [Will early blooms bear fruit? Key takeaways from the 2024 World Bank Spring Meetings](#) (by A Prizzon)

Bretton Woods Project - Spring Meetings 2024 Wrap Up: Despite mounting crises, persistent lack of political will to match rhetoric with action remains

<https://www.brettonwoodsproject.org/2024/04/spring-meetings-2024-wrap-up-despite-mounting-crises-persistent-lack-of-political-will-to-match-rhetoric-with-action-remains/>

“Global North intransigence, geopolitical tensions and breakdown of multilateralism continue to block IFI reform; Tension between scaling up finance and governance reform at BWIs persists; **Civil society marched in protest** demanding debt cancelations to address the climate crisis, cancelation of IMF surcharges, and ending harmful conditionalities that push countries into austerity.”

World Bank Group Aims to Expand Health Services to 1.5 Billion People

https://www.worldbank.org/en/news/press-release/2024/04/18/expanding-health-services-to-1-5-billion-people?intcid=ecr_hp_headerB_2024-04-18-SMUHCEventPR#?cid

Big news from late last week. “**Focus on improved affordability, expanded geographic reach, increased scope of services.**”

“The World Bank Group announced an ambitious plan to support countries in delivering quality, affordable health services to 1.5 billion people by 2030. This is part of a larger global effort to provide a basic standard of care through every stage of a person’s life—infancy, childhood, adolescence, and adulthood.”

“For decades, the World Bank Group has helped provide health services for women and children in more than 100 countries. A focused effort to become faster, work better with partners, and bring in the private sector has enabled the 80-year-old institution to pursue greater scale and impact. **The strategy to reach 1.5 billion people is focused on three core elements:** Expanding focus from maternal and child health to include coverage throughout a person’s lifetime, including non-communicable diseases. Expanding operations to hard-to-reach areas, including remote villages, cities, and countries. Working with governments to cut unnecessary fees and other financial barriers to health care.” **“To be counted toward this goal, a person must be seen and treated by a health-care worker via an in-person visit or telehealth. ... “**

“.... Strong partnerships will be critical for the World Bank Group to achieve results in health. The World Bank Group will fall short if it does not work hand-in-hand—faster and better—with non-government organizations, the private sector, and civil society. **The World Bank Group welcomes Japan’s announcement to launch a Universal Health Coverage (UHC) Knowledge Hub** to enhance health and finance ministries' capacity, an initiative supported by the Bank and the World Health Organization.... **The goal to deliver quality, affordable health services to 1.5 billion people by 2030 is one of the more recent examples of the World Bank Group’s commitment to become more impact-oriented** and is the byproduct of a concerted effort to build a better bank.”

Coverage and analysis also via:

- HPW - [World Bank Launches Ambitious Plan to Expand Health Services](#)

“... How will this be achieved? “A lot of hard work, a lot of knowledge, a lot of financing, and a lot of partnerships,” is how the aim will be realised, said Banga.”

“Financing is the obvious one. We’re a money bank and a knowledge bank. But even the money we can put to work will never be enough. **We’re talking about putting to work 50% more money per year than what we used to spend on health care, pre- the pandemic,”** he said. **But governments and the private sector would also have to invest in the effort....”**

“... Low-income countries spend an average of \$21 per person, per year on health care. “That’s not going to get to health care workers in remote areas. So we have to give them share financing, concessional and grant financing,” said Banga. **Middle-income countries have more money available, but “may not have the right regulatory policies** to create the multiplier that you want to create” – which could be done through private sector involvement. “We can help with incentivizing them to create the right regulatory platforms and the right policies.” This could involve private sector involvement in manufacturing essential medicines, or fortifying basic foods with vitamins....”

“Discussions with countries would involve identifying what they need to do to break through their barriers to deliver their share of the 1.5 billion – skills, infrastructure, medicines. “We bring a diversification of knowledge. We understand water, we understand climate, we understand agriculture. We understand how those connect to health challenges.....”

- Devex - [World Bank aims to bring health care to 1.5 billion people](#)

“The bank wants to double the amount of people it reaches with its health programming. But achieving that will depend on how much funding donors are willing to give.”

“... It marks a major **shift** for the bank by doubling its previous reach and ambition — the bank’s health programming has reached around 750 million people over the last five years. It will also see the lender maintain its higher spending on health compared to prepandemic levels. **In 2023, the bank spent \$4.4 billion in health investments, up from \$3.1 billion in 2019**, according to a bank spokesperson....”

- And if you want to **rewatch the Highlevel event** from last week, on Thursday in Washington DC: [Transforming Challenge into Action: Expanding Health Coverage for all](#) (with Banga, Tedros, and others...)

WB - New Financing Tools Receive Major Funding Boost

<https://www.worldbank.org/en/news/press-release/2024/04/19/new-financing-tools-receive-major-funding-boost?cid=ECR TT worldbank EN EXT>

“Support for innovative financial tools could generate up to \$70 billion over 10 years.”

“New financial instruments designed to boost lending capacity and enable the World Bank Group to take on more risk for shared global challenges have received a significant endorsement. A set of 11 countries announced commitments today for the **Portfolio Guarantee Platform, hybrid capital mechanism, and new Livable Planet Fund totaling \$11 billion.**”

“...The World Bank Group’s unique leveraging capability enables the resources pledged to hybrid capital and the Portfolio Guarantee Platform to be multiplied six to eight times over 10 years. Under certain conditions, the leverage amount could reach tenfold. **The resources pledged today could provide up to \$70 billion in urgently needed funds**, which can be deployed to address cross-border challenges and advance development goals....”

... Belgium, France, Japan, and the United States pledged to the Portfolio Guarantee Platform, while Denmark, Germany, Italy, Latvia, the Netherlands, Norway, and the United Kingdom made commitments to hybrid capital.

Japan is committed to providing the first contribution to the new Livable Planet Fund.

Debt in Global South

Reuters - IMF concerned about debt, fiscal challenges facing low-income countries

[Reuters](#);

“Shareholders of the International Monetary Fund agreed this week on the importance of addressing challenges faced by low-income countries, many of which are facing unsustainable debt burdens, IMF Managing Director Kristalina Georgieva said on Friday.”

“Multiple reports from the IMF and the World Bank this week sounded the alarm about economic developments and prospects in low-income developing countries, which are still grappling with the aftermath of the COVID-19 pandemic and other shocks.....”

“She said high debt levels posed a huge burden for low-income countries, including many in Sub-Saharan Africa, where countries are now facing debt service payments of 12% on average, compared to 5% a decade ago. High interest rates in advanced economies have lured away investments, and raised the cost of borrowing. “What is heartbreaking is that in some countries debt payments are up to 20% of revenues,” Georgieva said, adding that this meant those countries had far fewer resources to invest in education, health, infrastructure and jobs.....”

Guardian - World Bank official calls for shake-up of G20 debt relief scheme

<https://www.theguardian.com/business/2024/apr/21/world-bank-chief-economist-indermit-gill-g20-debt-relief-mechanism-common-framework>

“Chief economist says common framework has failed to provide any new money to world’s poorest countries since it was set up in 2020.”

“.... Indermit Gill, the bank’s chief economist, said that after four years the G20’s [common framework](#) – designed to speed up and simplify debt restructuring – had not provided a single dollar of new money. More than half the 75 countries deemed poor enough to be eligible for concessional finance from the World Bank are either in distress or close to it, and Gill said crippling high repayments were entrenching poverty.....”

“...He said a key weakness of the common framework was that private bondholders – an increasingly important group of creditors – were only brought in at the end of debt negotiations....

“... Gill said another weakness of the common framework was that its secretariat was the Paris Club – a group of 20-plus creditor countries mostly in the developed west. China – which has become a major creditor – is not a member and has refused to be forced into accepting terms agreed by the Paris Club. “You can’t have the Paris Club playing in the casino with Chinese money,” Gill said.....

“... Failure to come up with a workable debt framework was putting back development by years, the bank’s chief economist added. “Countries are deterred from going through the common framework because they won’t get access to financial markets and they won’t get debt relief.”... Although the IMF said last week that the global economy was [on course for a “soft landing”](#), Gill said he did not accept the argument that the world had “dodged a bullet”. A few countries – the US, China, India and Indonesia – were doing well, but other G7 countries were struggling, he said. “For low-income countries, things are terrible.”

PS: “The IMF takes a more positive view of the common framework, and thinks debt problems would be even worse had it not been set up. Its Africa director, Abebe Selassie, said at a press briefing last week that debt restructuring was a painful and lengthy process. “Without the common

framework we wouldn't have made the progress we have in helping Zambia and Ghana towards debt sustainability."

Guardian (Editorial) - The Guardian view on globalisation's discontent: it's not right for poor countries to fund the rich

<https://www.theguardian.com/commentisfree/2024/apr/24/the-guardian-view-on-globalisations-discontent-its-not-right-for-poor-countries-to-fund-the-rich>

"Wealthy nations exploit their position as the world's bankers to siphon off hundreds of billions from the needy."

"... A [paper](#) out last week calculates that the bottom four-fifths of humanity finance the richest fifth to the tune of \$660bn a year. The reason, say Gastón Nievas and Alice Sodano of the Paris School of Economics, is that **wealthy countries have become the world's bankers, able to squeeze debtors**. Poor nations borrow in rich-world currencies because they run deficits in energy and food, while exporting low-value goods relative to their imports. Markets are liberalised in poor countries and profits flow to the global north. **The US is the biggest winner, with the eurozone being a close second, draining \$160bn annually from the poor**. Every year, developing nations [forgo](#) 2%-3% of their GDP, sums better spent on education, health and the environment. **Globalisation's big winners in the developing world have lost out too**. The gains of the G8 group of industrialised nations are "paid by trade surpluses and financial losses of the Brics"....."

Global tax justice rising on agenda

Climate Change News - Global billionaires tax to fight climate change, hunger rises up political agenda

<https://www.climatechangenews.com/2024/04/19/global-billionaires-tax-to-fight-climate-change-and-hunger-rises-up-political-agenda/>

"The finance ministers of Brazil and France pushed this week for a tax on US-dollar billionaires of at least 2% of their wealth each year, with the \$250 billion it could raise going to tackle poverty, hunger and climate change. ... Zucman presented the proposal at a G20 finance ministers meeting in Sao Paulo in February. It was the "first time these issues of inequality, progressive taxation [and] extreme wealth concentration were discussed in such a forum", he said, adding that the "vast majority praised Brazil for putting those issues on the agenda". ... **The main barrier, he said, is that billionaires will fight back against it**. "They have a particular hatred for any kind of tax based on wealth. Why? Because that's the one tax that really works for them," he said...."

- See also the Guardian - [World's billionaires should pay minimum 2% wealth tax, say G20 ministers](#)

"Brazil, Germany, Spain and South Africa sign motion for fairer tax system to deliver £250bn a year extra to fight poverty and climate crisis."

“....The world’s 3,000 billionaires should pay a minimum 2% tax on their fast-growing wealth to raise £250bn a year for the global fight against poverty, inequality and global heating, ministers from four leading economies have suggested. ... In a sign of growing international support for a levy on the super-rich, Brazil, Germany, South Africa and Spain say a 2% tax would reduce inequality and raise much-needed public funds after the economic shocks of the pandemic, the climate crisis and military conflicts in Europe and the Middle East. They are calling for more countries to join their campaign, saying the annual sum raised would be enough to cover the estimated cost of damage caused by all of last year’s extreme weather events.....”

PS: unlike for the other 3 countries, it was not the German Finance minister signing this op-ed (the current one, as K Bertram noted, is firmly against this proposal), but **the German Development minister**.

Heated - Nobel Prize-winning economist calls for climate tax on billionaires

<https://heated.world/p/nobel-prize-winning-economist-calls>

“For the first time, the world’s most powerful countries are considering a proposal that would tax the super rich and send the money directly to the people on the front lines of the climate crisis.”

“The proposed climate tax is the brainchild of Nobel Prize-winning economist Esther Duflo, who presented it to the Group of 20 summit in Washington D.C. last Wednesday. Duflo suggested taxing global corporations and the world’s top billionaires to raise money for climate adaptation in countries that are most impacted by the climate crisis. The funds would be directly sent to the poorest individuals in those countries to help them prepare for climate disasters. Duflo proposes increasing an existing international tax on multinational corporations from 15 percent to 20 percent. There would also be a 2 percent wealth tax on the world’s top 3,000 billionaires. The two climate taxes combined could raise up to \$400 billion per year for a “loss, damage, and adaptation fund.””

Global Health Financing

Devex - At Spring Meetings, alarm bells sound over global health finance

<https://www.devex.com/news/at-spring-meetings-alarm-bells-sound-over-global-health-finance-107491>

Important analysis. **“Many lower-income countries are spending less on health than they did before the COVID-19 pandemic at a time when donor funding is on the decline.”** Some chunks:

“In Washington, D.C., where health and finance ministers, global health leaders, and international funders gathered for the World Bank’s Spring Meetings, these are ways of talking — or not talking — about a growing fear: A large group of countries are facing an alarming health funding landscape. “We have a problem globally,” health economist David Evans said Thursday at a forum on health financing. The problem, Evans said, is particularly acute in a group of 28 low- and middle-income countries whose governments are spending less on health than they did before the COVID-

19 pandemic, with no prospect — according to International Monetary Fund projections — of returning to those pre-pandemic levels in the next five years.”

“At the same time that national governments confront fiscal constraints that create tradeoffs between health spending and other budget line items, international health and development organizations are competing with each other this year for donor funding that threatens a post-pandemic retraction. The World Bank’s International Development Association, or IDA, the World Health Organization, and Gavi, the Vaccine Alliance are all calling on donors to replenish their funding this year....”

PS: “ On Thursday, sharing the main stage with WHO Secretary-General Tedros Adhanom Ghebreyesus, **Banga announced that the World Bank will extend its health programs to 1.5 billion people by 2030 — roughly doubling its current reach. But it’s not clear if that target comes with additional funding — and if so, where that funding will come from.** On stage in the World Bank’s atrium, **Banga mentioned a 50% increase in the bank’s funding for health, but that figure doesn’t appear in any of the accompanying materials about the target.**”

“In a call with reporters earlier in the week, the bank’s health lead, **Juan Pablo Uribe, said the new target is based on the roughly \$4.4 billion the bank spent on health 2023 and a desire “to maintain and, of course, as possible increase that funding number in the future.”** One reporter on the call politely asked the officials to restate what exactly it was they were announcing. A similar sentiment came through during the public announcement on Thursday. **Nigerian Health Minister Muhammad Ali Pate said he was “very encouraged” to hear the 1.5 billion commitment, but added that for Nigeria to contribute a potential 100 million people to that goal requires “backing that up with resources.”**”

PS: “**Within the global health landscape, sustainable financing for HIV presents a particular challenge.** Due to the epidemic’s emergency origins, HIV-affected countries disproportionately rely on external funding to support their response efforts and are therefore highly exposed to any changes in donor commitment. **In low- and middle-income countries, roughly one-third of overall health financing comes from international donors, according to Jaime Atienza Azcona, director of the equitable financing practice department at UNAIDS. But for HIV/AIDS, Atienza Azcona said, that reliance on international funding rises to three-quarters. ... That is putting pressure on health ministers to squeeze everything they can out of tight budgets, through reforms and other displays of “country ownership” that make them better candidates for support from external donors who have to pick and choose.....**” “**Nigeria is pushing a “trilateral compact” between its federal government, subnational governments, and external donors to use limited health funds more efficiently. Indonesia is trying to turn \$4 billion in multilateral development bank loans into a catalyst for private sector investment in health. Kenya is rallying around “donor transition road maps.” Meanwhile, health ministries are putting pressure on their finance colleagues to give them a bigger share of national budgets.....**”

KFF - Donor Government Funding for Global Family Planning Declines to Lowest Level Since 2016

[KFF](#);

“A new [KFF analysis](#) finds donor government funding for family planning efforts in low- and middle-income countries totaled US\$1.35 billion in 2022, a decline of 9% (US\$129 million)

compared to 2021 (\$1.48 billion). This figure marks the lowest level of funding since 2016 (\$1.31 billion). While some of the decline was because of decreases in actual funding by most donor governments, **more than two-thirds can be attributed to exchange rate fluctuations due to the strengthening of the U.S. dollar against most currencies during 2022.**” Check out the main findings.

WHO - Sustainable financing: WHO investment round Report by the Director-General

https://apps.who.int/gb/ebwha/pdf_files/WHA77/A77_17-en.pdf

Preparatory document for the World Health Assembly.

“The present document is submitted in response to decision EB154(1) (2024) and provides an **update on preparations for the WHO investment round.** It covers progress with regard to modalities and the investment case, and financial elements and resource mobilization. As outlined in document EB154/29 Rev.1, the WHO investment round aims to safeguard the global political momentum for health in order to rally stakeholders behind the Fourteenth General Programme of Work, 2025–2028 (GPW 14) and move the Organization’s finances towards more predictability and flexibility....”

Among others, **“the main investment round event will take place in the last quarter of 2024. “**

Pandemic Accord (INB negotiations)

Next week, on **April 29, INB negotiations will resume.** In the meantime, some analysis on the state of affairs and a look ahead to this last round before WHA77.

PS: text as of 22 April, via KEI - https://www.keionline.org/wp-content/uploads/A_inb9_3Rev1-en22april2024.pdf

GHF - Pressure Builds On Countries To Embrace Weak Pandemic Agreement, Operationalizing Equity at Risk with a Framework Approach

P Patnaik; https://genevahealthfiles.substack.com/p/draft-pandemic-agreement-april-2024-who-geneva?utm_campaign=email-post&r=97mey&utm_source=substack&utm_medium=email

Analysis from end of last week.

“Things are not looking good for the Pandemic Treaty discussions in Geneva. Diplomats are telling us that the process is at a real risk of unraveling. ...In today’s edition we bring you a quick update on the final draft of the Pandemic Agreement due for consideration later this month. We also discuss a resolution text that is slated to be taken up at the World Health Assembly next month.”

“... Earlier this week the Bureau of the Intergovernmental Negotiating Body released the latest draft of the Pandemic Agreement due for consideration **at a resumed meeting beginning April 29th that will see marathon negotiations with an aim to conclude this process by May 10th.** ... “

“What is also on the table is **a draft resolution text that lays out the link between the main agreement and processes that would follow the adoption of the text at the Assembly including setting up of Intergovernmental Working Groups for certain provisions,** immediate tasks for the WHO Director-General to follow through.”

“...**Preliminary assessment by countries seem to reveal three possibilities on the way forward according to those familiar with the discussions:** one is to accept the text and conclude negotiations; second to buy more time in order to strive for a more meaningful agreement; and third to walk away from the text and effectively declare a failure of this process. ... **The political pressure to accept the latest draft, a much watered-down version, is very high. Not only from Geneva-based actors, but also from capitals.** But countries will have to make a political choice on the extent to which they will support the draft in its current form, diplomatic sources tell us...”

“**At the moment, the draft mostly adopts a framework approach where countries broadly agree on principles, but defers practical actions to implement these principles to a later stage. The lack of time to conclude on the details, leaves little choice but to go down this road – unless countries decide otherwise in the coming days.** There has been little appetite for a **framework approach** from many countries both developing and developed ones, and yet, it now has precipitated into a reality.....

TGH - Pandemic Agreement Negotiations Begin Final Stretch: What To Expect

<https://www.thinkglobalhealth.org/article/pandemic-agreement-negotiations-begin-final-stretch-what-expect>

“With final negotiations set for late April, **two experts explain the nuances of the pandemic agreement's latest draft.**”

*“... Think Global Health sat down with **Alexandra Phelan of the Johns Hopkins Center for Health Security and Nina Schwalbe of Spark Street Advisors,** who have been closely following the negotiations to understand where the agreement started, its status, and the process happening in the weeks ahead. “*

A few quotes:

“... it's important to think in terms of **three components of PABS: access, equity benefit sharing, and the multilateral aspect.** “

“**The agreement is being proposed under Article 19 and will be governed by a Conference of Parties, which means that anybody who signs up to the treaty then governs the treaty.** Article 21 is a different part of the WHO constitution, under the governance of the World Health Assembly, and that's where the International Health Regulations sit.”

Plos GPH - Navigating time equity: Balancing urgency and inclusivity in pandemic treaty negotiations

Sharifah Sekalala et al;

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0003118>

Important viewpoint. « **the rapid pace** [of the negotiations towards a pandemic agreement] **prompts concerns about what we refer to as ‘time equity’—the fair allocation of time and resources for deliberation and decision-making among all stakeholders.....”**

“The danger of the ‘time is very short’ rhetoric: The rhetoric that ‘time is very short’ presents a significant danger, particularly for low- and middle-income countries (LMICs) advocating for vaccine equity and an equitable ABS system. Pressure to act swiftly or risk missing out on the treaty’s promise effectively warns LMICs that this is their sole opportunity, insisting they must conform to the timeline....”

“... Urgency, in this context, is not merely a call to action but a mechanism that reinforces existing power dynamics. By framing the negotiation timeline as urgent and non-negotiable, **it effectively sidelines the voices of LMICs, positioning them as less relevant to the urgency of the moment and perpetuates their marginalization.** This fundamental flaw in the current approach to treaty negotiations stands in stark contrast to principles of equity.....”

People’s Health Dispatch - Silenced voices: intercultural perspectives in the prevention, preparation and response to pandemics

<https://peoplesdispatch.org/2024/04/15/silenced-voices-intercultural-perspectives-in-the-prevention-preparation-and-response-to-pandemics/?ref=peoples-health-dispatch.ghost.io>

“Indigenous peoples are not included in the current draft of WHO’s Pandemic Treaty, raising concern about their health and well-being in the case of new pandemics.”

South Centre - Proposal for a new Article 11bis in the WHO Pandemic Accord: a Pandemic Technology Transfer Mechanism 23 April 2024

By Olga Gurgula and Luke McDonagh; https://www.southcentre.int/wp-content/uploads/2024/04/SV261_240423.pdf

“The COVID-19 pandemic demonstrates the failure of voluntary mechanisms during global emergencies and exemplifies the need for effective involuntary technology transfer tools. The WHO Pandemic Accord offers an opportunity to provide an effective mechanism to build upon existing TRIPS flexibilities in the specific pandemic context. We propose a new provision (Article 11bis) that outlines a mechanism on cross-border procedure of non-voluntary technology transfer during a pandemic. This procedure could be invoked in a pandemic scenario in which voluntary technology transfer mechanisms have failed to provide sufficient supplies of a needed pandemic product.”

IHR amendments (22-26 April)

WHO - International Health Regulations: amendments: Q&A

<https://www.who.int/news-room/questions-and-answers/item/international-health-regulations-amendments>

Worth looking into (for process etc).

WHO Proposed Bureau's text for Eighth WGIHR Meeting, 22-26 April 2024

https://apps.who.int/gb/wgihhr/pdf_files/wgihhr8/WGIHR8_Proposed_Bureau_text-en.pdf

Text as of 17 April.

- And a link: WHO - [WHO Director-General's remarks at the Eighth meeting of the Working Group on Amendments to the International Health Regulations \(2005\) – 22 April 2024](#)

Devex - Will new global health rules help make the world safer?

<https://www.devex.com/news/will-new-global-health-rules-help-make-the-world-safer-107500>

(gated analysis from end of last week) **“Amending the International Health Regulations, which is less publicized than the pandemic treaty, is crucial as the COVID-19 pandemic exposed issues linked to the IHR and countries' noncompliance to its provisions.”**

“Countries are meeting next week in hopes of finalizing new amendments to the International Health Regulations, the internationally binding agreement that defines countries' rights and obligations during public health emergencies. **Among the issues they are expected to hammer out are new texts related to equitable access to health products and financing under Articles 13 and 44.** “As you know, those two Articles were the focus of a full day of discussions on 8 March and the Bureau proposals build on the outcome of those discussions, taking into account the range of views and feedback provided,” **Ashley Bloomfield, co-chair of the working group on the IHR amendments**, wrote to Devex. **The bureau refers to the group of WHO member states coordinating the work on the IHR amendments.** Countries are also **expected to discuss new proposed options on how the World Health Organization should alert countries when it comes to health events and a combined proposal for an Implementation and Compliance Committee for these IHR....** **Some want to create a midlevel alert system for potential health crises, something to allow a global response to a crisis that hasn't yet become an official public health emergency of international concern, or PHEIC. One new amendment also calls for WHO to declare not just if something is a PHEIC, but if it's a “pandemic emergency,”** thus spurring world authorities to swift action.....”

PS: “But IHR review committee member Lawrence Gostin tells my colleague Jenny Lei Ravelo: “The idea is to prevent outbreaks from becoming pandemics. And so the idea of a pandemic emergency, once you determine that, it's really almost too late to do anything about it.””

HPW - Praise and Criticism as Talks to Amend International Health Rules Near Conclusion

<https://healthpolicy-watch.news/praise-and-criticism-as-talks-to-amend-international-health-rules-near-conclusion/>

Coverage of the **opening day**.

“The penultimate meeting of a World Health Organization (WHO) working group to amend the **International Health Regulations (IHR)** began in Geneva on Monday amid stakeholder praise and criticism for the **latest 64-page draft**.”

“... **WHO Director-General Dr Tedros Adhanom Ghebreyesus** said that the draft “reflects the patience, flexibility and commitment” of the WGIHR. He also expressed appreciation for the inclusion of “pandemic emergency” within the process of declaring a Public Health Emergency of International Concern (PHEIC). Amazingly, the current IHR neither mention nor define a pandemic....”

“However, the **International Federation of Pharmaceutical Manufacturers and Associations (IFPMA)** described the “pandemic emergency” along with several other new definitions as “excessively vague”, which made it “very difficult for industry to assess the overall instrument”. Other terms condemned for vagueness include “early action alerts”, stages in the PHEIC process, and “references to health products”, said the IFPMA’s Grega Kumer....”

“.... **Article 13 attracts the most attention**: The IHR’s amended **Article 13, dealing with the “public health response, including access to health products”**, attracted the most attention from stakeholders.”

“.... **Knowledge Ecology International (KEI)** welcomed the “**transparency mandate**” contained in Article 13 (9C). This calls on state parties to publish “**relevant terms of government-funded research agreements for health products needed to respond to a public health emergency of international concern as well as information where relevant on pricing policies regarding these products and technologies to support equitable access**”, said KEI’s Thiru Balasubramaniam. “**Article 13.7 envisions that WHO plays a coordinating role among state parties during public health emergencies of international concern. This coordinating role involves the facilitation of equitable access to health products, including through technology transfer on mutually agreed terms,**” added Balasubramaniam. KEI suggested two options to encourage technology transfer and know-how to facilitate the development of drugs, vaccines and other countermeasures.

Also with the **views from CEPI, TWN, Health Action International**,

GHF – “Equity” Stands A Chance In the International Health Regulations. Without Financing, Compliance At Stake [WG-IHR8]

https://genevahealthfiles.substack.com/p/ihr-equity-financing-geneva-2024-pandemic-inb?utm_campaign=email-post&r=97mey&utm_source=substack&utm_medium=email

Somewhat upbeat analysis from **Tuesday**.

“When countries began sharing their visions to amend the International Health Regulations two years ago, there was strong resistance to broaden the scope of these technical regulations to fix what is missing - namely to **reflect equity considerations**, among others areas. **A persistent fight by developing countries to keep these issues on the table in these complex negotiations have paid off to a certain extent. This week countries are discussing proposals that could make this a reality.** While we do not rule out realpolitik and tough bargaining to shape the final outcome, **this is widely being seen as a significant development....”**

“... **The Working Group set up to amend the International Health Regulations (WG-IHR) has tried to bell the cat. For the first time in more than two years of these negotiations, the Bureau of the WG-IHR has formulated proposals to reflect language that attempts to capture equity-related provisions suggested by developing countries in order to frame obligations on equitable access in the IHR. It however, shies away from pushing for a dedicated financing mechanism to ensure implementation of IHR obligations. While this is a significant start, whether this beast can be tamed will be clear in the coming days. There is expected to be push back on some of these elements from developed countries and even some developing ones, who have long resisted the articulation of equity-related provisions in the IHR. Many believe that expanding the scope, is akin to violating the technical nature of these rules and succumbing to political considerations. But ultimately countries will decide what they want.... “**

PS: **“Reaching near-consensus this week will be key not only for the IHR, but also in setting the tone for the Pandemic Agreement negotiations which resume next week.**

“... **Bureau’s proposed text to amend the IHR: Apart from significant provisions to reflect equity proposals from some developing countries, the Bureau has made suggestions on a vast area of technical matters** including early action alerts; pandemic emergency; pathways and reasoning to declare the types of emergencies; use of personal data; status of health documents; responsibilities of the Director-General; and, interactions between State Parties and WHO in the context of an emergency. It also weighs on a “de-escalation” framework in the event of winding down of an emergency such as in the case of COVID-19. (See Article 12 for example, on the determination of a public health emergency of international concern, including a pandemic emergency)...”

PS: **“Note that these are just proposals pending negotiations, and endorsement from member states this week.....”**

Third World Network WHO: WGIHR Bureau’s text recognises equity without effective implementation means

K M Gopakumar; <https://www.twn.my/title2/health.info/2024/hi240405.htm>

“ – A consolidated text on proposals to amend the International Health Regulations (IHR) 2005 **recognises the promotion of equity and solidarity as a principle of IHR implementation but undermines it with the absence of effective means of implementation.”**

“The text was produced by the Bureau of the Working Group on Amendments to the International Health Regulations 2005 (WGIHR), hereby referred to as **“the Bureau’s text”**. ... **The Bureau’s proposals undermine equity by placing the responsibility of financial investment on State Parties without considering the existing development divide among WHO Member States..... The Bureau’s**

text is to be discussed during the 8th meeting of the WGIHR which will take place on 22-26 April at the WHO Headquarters in Geneva in a hybrid mode.”

Third World Network – WHO: Monkeypox and avian flu outbreaks stress need for equitable access under IHR

<https://www.twn.my/title2/health.info/2024/hi240406.htm>

“The recent outbreak of diseases with potential to become a Public Health Emergency of International Concern (PHEIC) stresses the need for incorporating provisions in the International Health Regulations 2005 (IHR 2005) to promote equitable access to health products....”

“However, the discussions on equitable access to health products at the International Negotiating Body (INB) that is developing a pandemic instrument have captured the attention of various stakeholders including civil society organizations compared to parallel discussions at the Working Group that has been mandated to amend IHR 2005. ... The issue of equitable access is very critical in the context of IHR 2005 compared to the pandemic instrument. **A pandemic outbreak is less frequent compared to PHEIC and often a pandemic emanates from a PHEIC. Therefore, from a public health perspective it is important to facilitate equitable access to health products required for the prevention of and response to a disease that has the potential to become a PHEIC and further escalating to a pandemic.** Further, even if equitable access is addressed effectively in the pandemic instrument this would not ensure access in PHEIC situations because the scope of equitable access would be limited to pandemic situations only.”

- And a link: TWN - [WHO: Developed countries push for dilution of WGIHR Bureau’s text proposal on equity](#)

“Developed countries are pushing to dilute the proposal on equity from the Bureau of the Working Group on Amendments to the International Health Regulation 2005 (WGIHR). **The Bureau’s proposal is itself weak already as it lacks an effective implementation means** to address the lack of equity in IHR especially its silence on access to health products and the lack of financial vehicle to assist the implementation. ...”

More on PPR & GHS

Guardian - Next pandemic likely to be caused by flu virus, scientists warn

<https://www.theguardian.com/world/2024/apr/20/next-pandemic-likely-to-be-caused-by-flu-virus-scientists-warn>

From late last week. “Next pandemic likely to be caused by flu virus, scientists warn.”

“Influenza is still the biggest threat to global health as WHO raises fears about the spread of avian strain **An international survey, to be published next weekend, will reveal that 57% of senior disease experts now think that a strain of flu virus will be the cause of the next global outbreak of deadly infectious illness.** The belief that influenza is the world’s greatest pandemic threat is based on long-term research showing it is constantly evolving and mutating, said Cologne University’s Jon

Salmon-García, who carried out the study....” “ **Details of the survey** – which involved inputs from a total of 187 senior scientists – **will be revealed at European Society of Clinical Microbiology and Infectious Diseases (ESCMID) congress in Barcelona next weekend.**”

“The next most likely cause of a pandemic, after influenza, is likely to be a virus – dubbed Disease X – that is still unknown to science, according to 21% of the experts who took part in the study. They believe the next pandemic will be caused by an as-yet-to-be-identified micro-organism that will appear out of the blue, just as the Sars-CoV-2 virus, the cause of Covid-19, did, when it started to infect humans in 2019. Indeed, some scientists still believe Sars-CoV-2 remains a threat, with 15% of the scientists surveyed in the study rating it their most likely cause of a pandemic in the near future. Other deadly micro-organisms – such as Lassa, Nipah, Ebola and Zika viruses – were rated as serious global threats by only 1% to 2% of respondents.....”

Coming up end of July - Global Summit to bolster pandemic preparedness

[Global Summit to bolster pandemic preparedness | CEPI](#)

“The Global Pandemic Preparedness Summit 2024 in Rio de Janeiro, Brazil (29-30 July) will help to build a world that is better prepared for pandemic threats.”

“CEPI, Brazil’s Ministry of Health and Fundação Oswaldo Cruz (Fiocruz) will co-host a unique global gathering of pandemic preparedness and response experts to advance the global pandemic preparedness agenda. the Summit will focus on three central themes of the global pandemic preparedness agenda that, if designed and aligned in a complementary manner, could transform the world’s ability to respond quickly and equitably to the next Disease X: Enabling equitable access to vaccines, medicines and other health technologies through strengthening local and regional production capacity. Delivering the 100 Days Mission for vaccines, diagnostics and therapeutics. Enhancing global disease surveillance....”

Nature (News) - WHO redefines airborne transmission: what does that mean for future pandemics?

https://www.nature.com/articles/d41586-024-01173-7?utm_medium=Social&utm_campaign=nature&utm_source=Twitter#Echobox=1713955245-1

“The World Health Organization was criticized for being too slow to classify COVID-19 as airborne. Will the new terminology help next time?”

Africa CDC - Africa CDC launches initiatives to advance molecular diagnostics and genomic surveillance in Africa

<https://africacdc.org/news-item/africa-cdc-launches-initiatives-to-advance-molecular-diagnostics-and-genomic-surveillance-in-africa/>

“The Africa Centres for Disease Control and Prevention (Africa CDC) kicked-off two groundbreaking projects: the Integrated Genomic Surveillance and Data Sharing Platform (IGS) and Integrated Genomic Surveillance for Outbreak Detection (DETECT). These initiatives, co-funded by the European Union, are poised to fortify the Africa Pathogen Genomics Initiative (Africa PGI 2.0),

enhancing the capacity of member states for molecular detection of outbreaks, AMR genomic surveillance, and timely data sharing across Africa.”

“The kick-off meeting, convened at the Africa CDC Office in Addis Ababa, Ethiopia, signified a pivotal moment in the collaboration between the African CDC and the European Commission Health Emergency Preparedness and Response Authority (HERA) to strengthen outbreak detection and disease surveillance throughout Africa....”

Mpox

Science News - Africa intensifies battle against mpox as ‘alarming’ outbreaks continue

<https://www.science.org/content/article/africa-intensifies-battle-against-mpox-alarming-outbreaks-continue>

Important analysis. “New variant identified in Congolese mining town renews worries about global spread.” **Some excerpts:**

“Researchers and public health officials in Africa are intensifying their battle against mpox, a neglected infectious disease that long has circulated on the continent and suddenly gained notoriety in 2022 when it started to spread rapidly in Europe and North America. At a meeting last week in Kinshasa, the capital of the DRC, scientists from there and nine other affected African countries reviewed an alarming rise of cases on the continent, discussed plans to improve mpox surveillance and introduce vaccination, and launched an African-led research consortium.”

“The meeting, convened by the Africa Centres for Disease Control and Prevention (Africa CDC) and the first of its kind on the continent, came as more evidence pours in that in Africa, too, mpox is sexually transmitted—and not just among men who have sex with men (MSM), the community most affected during the recent global outbreak.....”

PS: **“....Because Kamituga is a hub for migrants, the outbreak “harbors the potential to spread nationally and internationally,” the authors warned. That’s particularly worrisome because the DRC has an mpox strain called clade I, which is estimated to be 10 times deadlier than clade II, the strain that went global in 2022 and that primarily affects countries in West Africa. (Fundamental differences between the two clades of the virus remain unclear “because we have not had the opportunity to consolidate and work in solidarity,” Ogoina says.) The virus in Kamituga is so distinct from previous clade 1 viruses that researchers propose referring to them as clade Ib and Ia, respectively.”**

“...Elsewhere in the DRC, most mpox infections occur in children, who for unclear reasons are also more likely to die from the disease than other age groups, infectious disease modeler Lilith Whittles from Imperial College London told the meeting. This year, the case fatality was 13.4% in the under-5 range, versus 5.9% in 5- to 15-year-olds and 4.3% in those older than 15. Many older adults often have at least some immunity to monkeypox virus, because most received the smallpox vaccine, which also protects against mpox. That vaccine went out of routine use in 1980, when

WHO declared smallpox eradicated, so the population that has no immunity to mpox has steadily increased.....”

“To control outbreaks, African countries hope to soon start offering people an mpox vaccine that went into wide-scale use in wealthy countries for the first time during the global outbreak. Made by Bavarian Nordic, it contains a weakened version of the vaccinia virus used in the smallpox vaccine. (The original vaccinia can cause severe harm and even death in people who have compromised immune systems.) A second weakened vaccinia-based vaccine, known as LC16m8, is made by the Chemo-Sero-Therapeutic Research Institute in Japan. WHO’s Strategic Advisory Group of Experts on Immunization in March made a global recommendation for the use of the weakened vaccines to help contain mpox outbreaks and as preventive shots for those at high-risk of becoming infected. Regulatory authorities in Nigeria and the DRC have recently approved both weakened virus vaccines and the U.S. government has donated 10,000 doses of the Bavarian Nordic product to Nigeria and 50,000 to the DRC, says Rosamund Lewis, who oversees mpox for WHO....”

“... The global outbreak helped bring new attention to mpox and led to a boom in research, Nachega says, but almost all of it came in Europe and North America. African researchers, he said, “still struggle to obtain funding.” **But at least scientists from affected African countries are now collaborating—and they have the attention of politicians. At the meeting’s end, health ministers from 12 African countries, half of whom attended, issued a [communiqué](#) that called for establishing an Africa Taskforce for Mpox Coordination.** “We’ve waited too long,” INRB Director Jean-Jacques Muyembe, a veteran mpox researcher, told meeting participants. “Now we need to act.””

World Malaria Day (25 April)

The theme of this year’s World Malaria Day, **“[Accelerating the fight against malaria for a more equitable world](#)”**, aims to highlight barriers to health equity, gender equality and human rights in malaria responses worldwide – as well as concrete measures to overcome them....

“Additionally, WHO, UNICEF, Gavi, the Vaccine Alliance and The Gates Foundation are collectively launching 'Humanly Possible' -- a shared global campaign to mark the profound achievement of EPI and call on leaders to invest in immunization.”

WHO Global Malaria Programme launches new operational strategy

<https://www.who.int/news/item/23-04-2024-who-global-malaria-programme-launches-new-operational-strategy>

“Ahead of [World Malaria Day](#), the WHO Global Malaria Programme published a [new operational strategy](#) outlining its priorities and key activities up to 2030 to help change the trajectory of malaria trends, with a view to achieving the global malaria targets. The strategy outlines **4 strategic objectives** where WHO will focus its efforts, including developing norms and standards, introducing new tools and innovation, promoting strategic information for impact, and providing technical leadership of the global malaria response.”

WHO Afro –Major step in malaria prevention as three West African countries roll out vaccine

<https://www.afro.who.int/countries/benin/news/major-step-malaria-prevention-three-west-african-countries-roll-out-vaccine>

“ In a significant step forward for malaria prevention in Africa, **three countries—Benin, Liberia and Sierra Leone—today launched a large-scale rollout of the life-saving malaria vaccine targeting millions of children across the three West African nations.** The vaccine rollout, announced on World Malaria Day, seeks to further scale up vaccine deployment in the African region. **Today’s launch brings to eight the number of countries on the continent to offer the malaria vaccine as part of the childhood immunization programmes,** extending access to more comprehensive malaria prevention. Several of the more than 30 countries in the African region that have expressed interest in the vaccine are scheduled to roll it out in the next year through support from Gavi, the Vaccine Alliance....”

- Link: TGH - [How Innovative Partnerships Accelerated Access to New Malaria Tools](#)

By E Liepa (Global Fund) et al.

Cancer

Lancet – Offline: It is time to take cancer more seriously

R Horton; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)00853-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00853-5/fulltext)

“The Lancet has published two Commissions in 2024 addressing the commonest cancers among men and women: prostate cancer (led by Nicholas James) and breast cancer (led by Charlotte Coles). As we were preparing these Commissions for publication, we considered writing an editorial linking the two cancers. But we hesitated. Surely these conditions are distinguished by their differences, not their similarities. Breast cancer is preventable. No such possibilities exist for prostate cancer. As our Commission on Prostate Cancer concluded: “The projected rise in prostate cancer cases cannot be prevented by lifestyle changes or public health interventions.” Yet, observing their launches and listening to the debates they provoked suggests that **these cancers have more in common than might be appreciated—synergies that have important implications for accelerating cancer prevention and control....”**

Among others: **“First, the burden of both cancers is projected to become a global health crisis.** Health systems need to prepare now for a surge in prostate cancer cases (2·9 million by 2040)—and a surge in deaths. Most of these cases will occur in Asia, South America, and Africa. A similar picture will be seen for breast cancer: more than 3 million new cases by 2040 and over 1 million deaths, with low-income and middle-income countries disproportionately affected. **Second, there are unacceptable inequities in access to diagnostic and treatment services within and between countries for both cancers.....”**

Horton then goes on to **argue for a human-rights based approach to cancer care**. “It is an approach that must be rooted in the fundamental right of all people to services for cancer prevention and control. “

Decolonize Global Health

PLOS GPH - Epistemic disobedience–Undoing coloniality in global health research

Thirusha Naidu;

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0003033>

Important concept. “**Epistemic violence continues where knowledge systems are overwhelmingly dominated by Global North epistemology**. Colonially enforced language and cultural norms still deprive women, people of colour and Indigenous researchers and communities from fully engaging in global health research. Colonially influenced education, resources, and research infrastructure produced the modern Global North-South disparities in research capacity. Global North researchers successfully publish in international journals through access to social capital, research agendas and funding opportunities. People from previously colonised regions are underrepresented in leadership roles in global health research, leading to weak Global South influence and participation in research....”

“.... **Epistemic disobedience** demands the speciously impossible; provoking violent responses, fragility or denial in those who benefitted, over generations, from current dominant systems....”. Read what more it entails.

PLOS GPH - Decolonising global health research: Shifting power for transformative change

Ramya Kumar, Rajat Khosla & David McCoy;

<https://journals.plos.org/globalpublichealth/article?id=10.1371/journal.pgph.0003141>

“.... **This paper applies three intersecting dimensions of colonialism (colonialism *within* global health; colonisation *of* global health; and colonialism *through* global health) to develop a broader and more structural understanding of the policies and actions needed to decolonise global health research**. It argues that existing guidelines and checklists designed to make global health research more equitable do not adequately address the underlying power asymmetries and biases that prevail across the global health research ecosystem. **Beyond encouraging fairer partnerships within individual research projects, this paper calls for more emphasis on shifting the balance of decision-making power, redistributing resources, and holding research funders and other power-holders accountable to the places and peoples involved in and impacted by global health research.**”

Devex - Opinion: The world is becoming more religious. That matters for development

By Waseem Ahmad, Patrick Watt; <https://www.devex.com/news/opinion-the-world-is-becoming-more-religious-that-matters-for-development-107520>

“As locally embedded institutions, faith groups can sow the seeds for long-term systems change and be key in a decolonized approach to development.”

“...If we are to effectively tackle these biggest global issues, we need to better understand the world in which we operate. As leaders at [Islamic Relief](#) and [Christian Aid](#), we see that among many global development groups, faith is a force that is either marginalized or ignored....”

“As the demographic weight of the global south [increases](#), the world is arguably becoming more, rather than less religious. This gap in religiosity between higher- and lower-income countries risks driving a wedge of mutual incomprehension between development groups in the global north and those in the global south. Indeed, we fear the failure to apply a faith-literate approach to development will come at a cost in terms of community acceptance and effectiveness.... Our organizations, in partnership with the [University of Leeds](#) and the [Joint Learning Initiative](#), are convening an international conference this week — 12 years after the defunct U.K. [Department for International Development](#) launched its [faith partnership principles](#) — to explore the role of faith in international development. It is our hope this conference will help established development groups, from bilateral donors to international NGOs, to better understand this landscape and engage more effectively with faith as a key factor in development.”

Development Today -Call for Sida to give more direct multi-year funding to civil society groups in Global South

<https://www.development-today.com/archive/2024/dt-3--2024/call-for-sida-to-give-more-direct-multi-year-funding-to-civil-society-groups-in-global-south>

(gated) “In response to Sida’s plan to open its civil society funding to global competition, a coalition of Global South-based organisations has written to the Swedish aid agency urging it to start providing multi-year funding directly to groups in developing countries.”

“The signatories express concern over the negative repercussions of abruptly cancelling existing grant agreements which, they write, will have a detrimental impact on already-agreed programmes of work between Swedish organisations and their partners....”

Planetary Health

Lancet Comment – Every day is Earth Day: Indigenous Peoples and their knowledges for planetary health

N Redvers et al ; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)00704-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00704-9/fulltext)

“For Indigenous Peoples, every day is Earth Day, with the basis of their lives underpinned by a healthy relationship with the planet and extensive Indigenous Traditional Knowledges (ITK) developed over millennia. However, Indigenous leadership within planetary health practice to shape research, policy, and practice is still challenged by a multitude of factors....”

“... There are, however, some encouraging developments. ... “

Authors conclude: “... if planetary health is to be appropriately and successfully mobilised, Indigenous Peoples and their knowledges cannot continue to be marginalised, disconnected, and

discounted from within government and scientific institutions. Researchers, practitioners, and policy makers need “to see from one eye with the strengths of Indigenous ways of knowing, and to see from the other eye with the strengths of western ways of knowing, and to use both of these eyes together” for the survival of our planet. We need to understand that Ko au te awa, ko te awa ko au (I am the river, and the river is me)....”

Climate Home News - Peak COP? UN looks to shrink Baku and Belém climate summits

<https://www.climatechangenews.com/2024/04/24/peak-cop-un-looks-to-shrink-baku-and-belem-climate-summits/>

“While 84,000 delegates attended COP28 in Dubai, just 40,000-50,000 are expected at COP29 in Baku and COP30 in Belém.”

Climate Change News - Tensions rise over who will contribute to new climate finance goal

<https://www.climatechangenews.com/2024/04/25/tensions-rise-over-who-will-donate-to-new-climate-finance-goal/>

“Germany wants all high-emitters, especially among G20 countries, to pitch in. But China and Saudi Arabia say it is only the responsibility of developed nations.”

Guardian - Fears grow over rising number of oil lobbyists at UN plastic pollution talks

<https://www.theguardian.com/environment/2024/apr/25/fears-grow-over-rising-number-of-oil-lobbyists-at-un-plastic-pollution-talks>

“**Proposed global treaty to curb production** represents challenge to producers of fossil fuels, from which most plastics are made.” Discussions are held in **Ottawa, Canada**, till Monday.

“**The number of fossil fuel and petrochemical industry lobbyists at UN talks** to agree the first global treaty to cut plastic pollution has **increased by more than a third**, according to an analysis....”

Earth System Governance - Exploring the planetary health equity governance supercluster complex

N Frank et al; <https://www.sciencedirect.com/science/article/pii/S2589811624000077>

“**The global planetary health equity (PHE) governance architecture** can shape government responses to the interrelated challenges of the climate crisis, economic inequality, and poor health. The structure of this architecture has yet to be examined. **Using network analysis, we provide the first mapping of the PHE topology and show that the PHE governance architecture is highly centralized and dominated by economic governance organizations.**”

Access to vaccines, medicines & other health technologies

Guardian - Cost of developing new drugs may be far lower than industry claims, trial reveals

<https://www.theguardian.com/global-development/2024/apr/25/cost-of-developing-new-drugs-may-be-far-lower-than-industry-claims-trial-reveals>

“MSF calls for transparency after its bill for a trial of TB treatment came to a fraction of the billions claimed by pharmaceutical companies.”

“...Doctors have for the first time released details of their spending on a major clinical trial, demonstrating that the true cost of developing a medicine may be far less than the billions of dollars claimed by the pharmaceutical industry. Médecins Sans Frontières (MSF) is challenging drug companies to be transparent about the cost of trials, which has always been shrouded in secrecy. Its own bill for landmark trials of a four-drug combination treatment for drug-resistant tuberculosis came to €34m (£29m). Current estimates for research and development of new medicines range from €40m to €3.9bn.....”

- Related: MSF press release - [In precedent-setting move towards drug-development cost transparency, MSF reveals cost of its landmark TB clinical trial: €34 million](#)

“MSF urges public and non-profit actors to publish clinical trial costs to improve access to medical products for all .” From the 5th WHO Pharmaceutical Pricing and Reimbursement Policies conference.

PS: “...Building on this analysis, **MSF developed ‘[Transparency CORE](#)’, a clinical trial cost reporting toolkit**, and urges all public and non-profit actors to publish their clinical trial costs and support the development of international policy to mandate standardised cost reporting.”

Project Syndicate - The Key to Transforming African Health

J Ghosh; <https://www.project-syndicate.org/commentary/africa-must-produce-its-own-drugs-and-vaccines-by-jayati-ghosh-2024-04?barrier=accesspaylog>

“African countries were among the last to receive COVID-19 vaccines, having been crowded out by vaccine-hoarding wealthier countries and denied access to essential technologies. Fortunately, this bitter experience appears to have catalyzed a much-needed policy shift toward localizing production.”

Excerpts: “... **These initiatives face significant challenges, especially their reliance on voluntary technology transfers, which have proven to be very limited in scope. To access essential knowledge and force multinational companies (MNCs) to share their technologies, African countries must expand their use of compulsory licensing**, in line with their own patent laws and the Trade-Related Aspects of Intellectual Property Rights (TRIPS) Agreement. Notably, the mRNA hub in South Africa has already faced legal challenges from Moderna, itself a beneficiary of US government subsidies

and patent sharing. **This underscores the importance of ensuring that the ongoing negotiations for a global pandemic treaty include specific provisions addressing compulsory licensing....** “

“... Given that **Africa’s rich genetic diversity makes it a veritable treasure trove of genomic data, the risk of knowledge and data theft is a pressing concern.** While **the African CDC’s Pathogen Genomics Initiative** was celebrated as a major achievement when it was launched in 2019, there are now valid concerns that the pandemic treaty could make these data globally accessible, potentially benefiting large pharmaceutical companies in rich countries without ensuring fair compensation for Africa. Tellingly, foreign powers are already squabbling over who should control access to this invaluable database.”

Reuters - WHO likely to issue wider alert on contaminated J&J cough syrup

[Reuters](#);

From end of last week. **“The World Health Organization is likely to issue a wider warning about contaminated Johnson and Johnson-made [\(JNJ.N\)](#) children’s cough syrup [found](#) in Nigeria last week, it said in an email....”**

“... The U.N. health body said it puts out **global medical product alerts** to "encourage diligence" by national authorities and **was likely to do so in this instance,** "subject to confirmation of certain details from parties""

Stat - Colombia issues a compulsory license for an HIV medicine and ‘plants a flag for global health equity’

<https://www.statnews.com/pharmalot/2024/04/24/hiv-gsk-pfizer-viiv-colombia-compulsory-license-medicines-patents/>

“After months of deliberation, the Colombian government has issued a compulsory license for an HIV medicine, the first time the country has taken such a step, one that also marks a significant move in the increasingly global battle over access to medicines. The license is designed so that tens of thousands of Colombians can obtain a lower-cost version of dolutegravir, a medicine that is manufactured and sold by ViiV Healthcare, a company that specializes in HIV treatments and is largely controlled by GSK. Dolutegravir is recommended by the World Health Organization as part of the preferred first-line treatment regimen for people living with HIV.....”

Devex - Opinion: Why the silence on the shortfall in malaria vaccine doses?

Z Kafuko et al ; <https://www.devex.com/news/opinion-why-the-silence-on-the-shortfall-in-malaria-vaccine-doses-107439>

“The number of doses of the latest malaria vaccine reported in the press for distribution appears far lower than supposed production capacity.”

“The public record reveals an enormous gap between producible doses and planned doses, while we are left without an explanation from international institutions on this gap. ... The [Serum Institute of India](#) stated in 2023 that it could produce 120 million R21 doses, enough to vaccinate 40

million children with the initial three-dose course, which would already cover half of [eligible children](#) — compared to [GlaxoSmithKline's](#) production output of [only 6 million doses](#) of RTS,S this year. **The number of R21 doses planned for this year are unclear, but figures reported so far fall way short of the 120 million-dose potential.** [The Financial Times in late January](#) reported that [Gavi, the Vaccine Alliance](#) planned to distribute 10 million doses in 2024, but the organization did not further explain this figure. More recently, it came to light that 25 million doses were to be sent to the African continent [in April](#) for distribution by [UNICEF](#) and Gavi [later in the year](#). ...”

“... Many international institutions and funders recognize the gravity of malaria, of course, and **this makes the recent revelations in the Financial Times of 10 million doses to be distributed versus the potential 120 million doses all the more surprising.**”

FT - Covid vaccine makers to clash in London over mRNA patent dispute

<https://www.ft.com/content/41d9ec34-4bea-445f-98f4-27a20b9f4445>

Analysis from early this week. **“Moderna alleges Pfizer and BioNTech infringed its patents in use of mRNA platform.”**

“Moderna will clash with Pfizer and BioNTech in a pivotal London patent trial over the development of Covid-19 jabs that will help determine who pioneered the technology behind the coronavirus vaccines that saved millions of lives in the pandemic. The High Court is due on Tuesday to hear a **legal complaint brought by Moderna, which alleges that its competitors infringed two of its patents in their use of the mRNA platform that was key to their vaccines.** BioNTech and Pfizer have said the patents are invalid. **The case is the latest in a series of intellectual property battles that companies are fighting around the world over mRNA technology,** which has helped generate billions in revenues for the pharmaceuticals industry. If successful, Moderna would be in line for a share of the profits Pfizer and BioNTech generated from their joint vaccine, Comirnaty. **Legal experts said the London ruling could also influence litigation in other jurisdictions — and boost the reputations of the winners....**”

PS: “.... **Earning some royalties from Comirnaty would help compensate for falling sales of Spikevax, Moderna's only commercialised product,** which declined to \$6.7bn last year as demand for protection against Covid has faded.....”

PS: “... **judges elsewhere have yet to rule on a key element of the London case that will be watched more widely: a dispute centred on when the Covid pandemic ended.** In October 2020, Moderna pledged not to enforce intellectual property rights for vaccines “intended to combat the pandemic”. Moderna then amended the pledge in March 2022 to say that in wealthy countries it expected rivals to “respect” its intellectual property and that it was willing to license its technology “on commercially reasonable terms”. It is for after this period that it is seeking damages. **Pfizer and BioNTech will dispute Moderna's ability to withdraw the pledge when it did, given the World Health Organization did not declare the end of the “global health emergency” until March 2023.** The question will be discussed in a parallel trial starting in May....”

FT - Scientists develop simple test to boost cancer detection in poorer countries

<https://www.ft.com/content/6bef73f5-ed50-4e51-81fa-b04e13b43118>

“Technique highlights concerns shifting global disease burden as populations age.”

“Scientists have developed a simple and affordable blood test to help spot cancer cases in low- and middle-income countries, marking the latest move to boost disease prevention among ageing populations. The method can detect multiple diseases within minutes and could slash missed diagnosis rates for colorectal, gastric and pancreatic cancers, according to the **Shanghai-based researchers.”**

“... “[The] approach is practical and can achieve a **high level of diagnostic accuracy, even when carried out by local health workers in resource-limited clinical settings,”** the Shanghai scientists write in the paper published by [Nature Sustainability](#) on Monday.”

“.... The tool developed by the researchers uses dried spots of serum that can be transported to central facilities for analysis, reducing the need for specialised facilities and refrigerated storage used in traditional cancer blood testing. **Experiments suggested that use of the technique in less developed regions could reduce the estimated proportion of undiagnosed cases of gastric cancer** from 77.57 per cent to 57.22 per cent, colorectal cancer from 84.30 per cent to 29.20 per cent, and pancreatic cancer from 34.56 per cent to 9.30 per cent, the researchers said.....”

Fierce Pharma - The top 20 pharma companies by 2023 revenue

<https://www.fiercepharma.com/pharma/top-20-pharma-companies-2023-revenue>

“There were changes at the top and the bottom of last year’s top 20 pharma rankings by revenue. And, in between, Novo Nordisk made a significant leap, jumping five spots propelled by skyrocketing sales of its diabetes and obesity treatments Ozempic and Wegovy. **Accounting for the changes at the high and low ends of the rankings were plummeting sales of COVID-19 products.”**

“At the top, Pfizer ceded the No. 1 slot as its revenue tumbled 41% from an industry record \$100.3 billion in 2022 to \$58.5 billion last year. The difference was directly attributable to declining sales of COVID vaccine Comirnaty and COVID antiviral Paxlovid. After the duo combined for sales of \$56.7 billion in 2022, they fell all the way to a combined \$12.5 billion last year.... .. **J&J was No. 1 in 2023 by a comfortable margin over No. 2 Roche,** which raked in sales of \$58.7 billion Swiss francs (\$67 billion) last year...”

“... At the bottom of the rankings, dropping out of the top 20, were prolific COVID vaccine sellers Moderna and BioNTech, which occupied the No. 18 and No. 20 slots, respectively, in 2022, with sales of \$19.3 billion and 17.3 billion euros (\$18.2 billion). Both were also among the industry’s top 20 in 2021, but, last year, their revenues tumbled to \$6.8 billion and 3.8 billion euros (\$4.1 billion). **Replacing Moderna and BioNTech in the top 20 are generics powers Teva,** which generated sales of \$15.8 billion last year, **and Viatris,** which pulled in \$15.4 billion.”

- Link – MSF Access: [As Danaher reports quarterly earnings and increased market share for Cepheid’s GeneXpert medical tests, MSF calls on corporation to drop all test prices to \\$5 for low- and middle-income countries](#)

Oral health

BMJ Feature - A new approach to oral health can lead to healthier societies

J Fisher, K Buse et al; <https://www.bmj.com/content/385/bmj.q925>

“New definitions of oral health provide an opportunity to change mindsets and promote innovation to tackle high levels of unmet needs, but this will only be realised with a radical change in practice, argue **Julian Fisher and colleagues.**”

“More than 3.5 billion people globally suffer from the main oral diseases. These conditions combined have an estimated global prevalence of 45%—**higher than any other non-communicable disease. A major barrier to improving this situation is our approach to oral health.** The prevailing mindset is that oral health is synonymous with dentistry and that poor oral health has little impact on personal and societal health and wellbeing. We need to shift away from the idea that the prevention and control of certain oral diseases equates to overall oral health and instead move to a broader and more inclusive understanding.....”

Gaza

UN News - Independent review panel releases final report on UNRWA

<https://news.un.org/en/story/2024/04/1148821>

“An independent panel released its much-awaited report on Monday about the UN relief agency for Palestine refugees (UNRWA), providing 50 recommendations and noting that Israeli authorities have yet to provide proof of their claims that UN staff are involved with terrorist organisations.”

Guardian - UN rights chief ‘horrified’ by reports of mass graves at two Gaza hospitals

https://www.theguardian.com/world/2024/apr/23/un-rights-chief-horrified-by-reports-of-mass-graves-at-two-gaza-hospitals?CMP=twl_b-gdnnews

“The UN human rights chief, Volker Türk, has said he was “horrified” by reports of mass graves containing hundreds of bodies at two of Gaza’s largest hospitals.””

UN News – Amid campus crackdowns, Gaza war triggers freedom of expression crisis

<https://news.un.org/en/story/2024/04/1149001>

“Across the United States, “heads are rolling” at the top of some Ivy League universities amid a campus-wide crackdown on students protesting Israel’s war in Gaza, shining a spotlight on the question of freedom of expression worldwide, said **UN Special Rapporteur Irene Khan.**”

““The Gaza crisis is truly becoming a global crisis of the freedom of expression,” said Ms. Khan, the UN Special Rapporteur on the promotion and protection of the right to freedom of opinion and expression. **“This is going to have huge repercussions for a long time to come.” ...”**

Miscellaneous

Guardian - UK accused by Amnesty of ‘deliberately destabilising’ human rights globally

<https://www.theguardian.com/global-development/2024/apr/24/uk-accused-amnesty-destabilising-human-rights-globally-gaza-israel-russia-ethiopia-sudan-myanmar>

“Rights chief also warns Britain will be ‘judged harshly by history for its failure to help prevent civilian slaughter in Gaza’.”

“The UK has been accused by [Amnesty International](#) of “deliberately destabilising” human rights on the global stage for its own political ends. In its annual global report, released today, the organisation said Britain was weakening human rights protections nationally and globally, amid a near-breakdown of international law. The damning Amnesty report also criticises Israel’s allies for the failure to stop the “[indescribable civilian bloodshed](#)” in Gaza. In a stark warning to world leaders, the organisation said the world was reaping a harvest of “terrifying consequences” from escalating conflict and the near-breakdown of international law.....”

Politico – WHO’s broken bot

Politico: <https://www.politico.com/newsletters/future-pulse/2024/04/24/the-whos-broken-bot-00154013>

“For a cautionary tale on the dangers of health care by chatbot, look no further than the WHO...”. Apparently S.A.R.A.H is wildly inconsistent...

PS: “In a letter to the WHO, Health Action International, a Dutch advocacy group, said SARAH regularly dispenses poor-quality answers and broken links — and it wants the bot taken down.”

“The WHO’s take: In an email to POLITICO, Alain Labrique, director of the WHO’s digital health and innovation department, responded: “We welcome all feedback about the SARAH tool, which could be used to improve and strengthen health promotion initiatives — and our understanding of the role of AI in these efforts.””

Global health events

With some more analysis of the **People’s Health Assembly** (in Mar del Plata), and also some news on the **Melbourne Regional World Health Summit**.

People's Health Dispatch - 5th People's Health Assembly calls for the transformation of health systems

<https://peoplesdispatch.org/2024/04/15/5th-peoples-health-assembly-calls-for-the-transformation-of-health-systems/?ref=peoples-health-dispatch.ghost.io>

“Activists at the 5th People’s Health Assembly called for the transformation of health systems, and to build strategies and unite struggles against privatization and corporate capture.”

“The 5th People’s Health Assembly (PHA 5), held in Argentina from April 7 to 11, deepened discussions on the much-needed transformation of health systems. Since the adoption of the Alma Ata Declaration in 1978, health systems have increasingly strayed from the goals of Comprehensive Primary Health Care and Universal Health Care, becoming victims of financialization and corporatization, the activists warned.”

“Health goals have been subjugated to shareholder values, market fluctuations, and financial failures,” commented **Nicoletta Dentico** of the Society for International Development (SID) during the Assembly....”

PS: **“There is a need for the concept of decolonization to leave pure academia and go back to social movements – because this is where the communities impacted are,” Brito said....”**

- See also **People’s Health Dispatch - [PHA5 Mar del Plata 2024 Call to Action](#)**

“After months of mobilization in country circles and thematic groups, over 600 activists met in Mar del Plata, Argentina, at the 5th People’s Health Assembly. **This Call to Action includes the demands and commitments of the People’s Health Movement following the debates held during the PHA.”**

- And [People’s Health Dispatch - Demilitarization and peace sovereignty are foundations for global health, People’s Health Assembly concludes](#)

“Health activists attending the People’s Health Assembly called for peace and demilitarization as a means to Health for All.”

“...Health for all cannot be achieved without demilitarization and peace sovereignty, is one of the conclusions of the 5th People’s Health Assembly (PHA 5), which took place in Mar del Plata, Argentina from April 7-11. Armed conflicts and occupations, as well as practices like land grabbing and discrimination against Indigenous peoples, are some of the most important determinants of global health today—not only because they lead to the destruction of health infrastructure but because they have the potential to shape the mental and physical health of generations to come....”

“The modern version of colonialism, described at the assembly by David McCoy of the United Nations University, as the implementation of colonial practices through oligopolies and monopolies of entire economic sectors, enables “wealth accumulation without physical land occupation.” Yet, wars and armed conflicts remain a legacy of the imperialist practices of the Global North, as witnessed by the ongoing violence in Yemen, Sudan, and Palestine, among others....”

Regional World Health Summit in Melbourne (22-24 April)

<https://www.worldhealthsummit.org/regional-meeting/2024-australia.html>

- Via [Devex](#): “The World Health Summit regional meeting kicked off in Melbourne, Australia, on Monday, and there was **ample evidence of the health challenges ahead in the Asia-Pacific — from obesity to stunting, sometimes in the same country** — as in the case of Malaysia. “

“But **Ilona Kickbusch**, co-chair of the Council of the World Health Summit, told the plenary on the first morning that **governments are still too reluctant to look backward, notably at the lessons learned from the COVID-19 pandemic**. "It seems to me that in many countries one doesn't want to touch it with a barge pole," she said.....”

- Some ‘Melbourne WHS’ **key themes**, via a **LinkedIn post** from **Alicia King**:
<https://www.linkedin.com/feed/update/urn:li:activity:7189088682400800770/>

Trust; social, environmental & digital determinants of health ; equity; community engagement; power; universality.

- And via Croakey: an account of a presentation by Kickbusch on ‘**creating health societies in times of polycrisis**’. <https://www.croakey.org/creating-healthier-societies-in-a-time-of-polycrisis-what-does-it-take/>

Global health governance & Governance of Health

G7 Foreign Ministers’ meeting in Italy (Capri, 19 April)

Cfr tweet Marwin Meier:

“Section 15 is on Global Health. The **#GlobalHealth** section on p.12 of the [#G7 Foreign Ministers’ Meeting Communiqué](#) mentions **#UHC, #PPR, #OneHealth, #pandemicFund, #AMR, #WHO, #Covid19 and #UHC**: ..."promoting Universal Health Coverage as essential elements of pandemic preparedness."

G20- “Pandemics have no borders”: global debate on how to improve economic resilience to sanitary crises is essential

<https://www.g20.org/en/news/pandemics-have-no-borders-global-debate-on-how-to-improve-economic-resilience-to-sanitary-crises-is-essential>

“During the **side event “Simulation Exercise for Economic Resilience to Pandemics”**, part of the **IMF Spring Meetings taking place in Washington, D.C.**, in the United States, Ambassador Tatiana Rosito, the G20 Finance Track coordinator, cautioned that the **crisis brought on by the Covid-19 pandemic has highlighted the need for a reassessment of global paradigms regarding joint resilience capacity, aimed at preserving the finances of nations and their populations.**”

“... **Brasil supports the priority established by the G20 Joint Force Task for Finance and Health** to improve the assessment of global health and social and economic vulnerability that result from pandemics....”

Lancet (Comment) – Why Latin America needs a regional Centre for Disease Control and Prevention

P Garcia et al; [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(24\)00813-4/abstract](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00813-4/abstract)

“.... In late 2023, as a group of academics and public health experts from different countries in the region, we convened a meeting to analyse the challenges of Latin American countries to tackle pandemic prevention, preparedness, and response (PPPR). The discussions focused on gaps in coordination and the value of a regional approach. **We concluded that there is a need to call for the creation of a Latin American Regional Centre for Disease Control and Prevention (LATAM-CDC) to bolster regional resilience against future health crises....**”

The Coalition for Global Prosperity (report) - From Expertise to Influence: UK's Soft Power in Global Health

<https://www.coalitionforglobalprosperity.com/research-insight/uk-soft-power-in-global-health>

“....The UK’s leadership in global health has important implications for foreign policy. In particular, the strategic use of the UK’s distinctive institutional strengths can serve as a cornerstone of its soft power....”

With 5 recommendations. *(ps: ludicrous read of the week)*

Devex Weekender: MAGA’s plan for the World Bank

<https://www.devex.com/news/devex-weekender-maga-s-plan-for-the-world-bank-and-baby-talk-at-skoll-107483>

“Plans for the World Bank's fate under Trump: As the World Bank concludes its Spring Meetings in Washington, D.C., a proposal is forming that could pull the rug from under its plans. **The Heritage Foundation, an influential right-wing think tank, wants the United States to withdraw from the institution if Donald Trump wins the presidential election in November, apparently seeing it as a waste of money and a suspicious “foreign entity.”** (Never mind that it’s based in the U.S. capital, it’s traditionally led by a U.S. national, and the U.S. is its biggest and most influential shareholder.) **It sounds far-fetched — but then-President Trump withdrew from both the World Health Organization and the Paris Climate Agreement last time he was in power** (though the former was never completed by the time he left office.) While he might need congressional approval to actually withdraw from the World Bank, **he could simply stop giving it money.** That **would leave a vacuum and a big question over who might fill it — eyes are, of course, on China —** which might give him pause for thought. “

O'Neill - Community Engagement in Global Fund Country Coordinating Mechanisms: Findings from the RISE Study

<https://oneill.law.georgetown.edu/publications/community-engagement-in-global-fund-country-coordinating-mechanisms-findings-from-the-rise-study/>

The Global Fund has prioritized the strengthening of CCM functioning and has also emphasized maximizing community engagement as a core objective in its 2023–2028 Strategy. The RISE (Representation, Inclusion, Sustainability, and Equity) study was launched to gather high-quality empirical data on the meaningful participation of communities and civil society in CCMs. Building on the lessons learned from the Global Fund, RISE was designed as a mixed-method, participatory research study, using community-developed indicators and developing recommendations collaboratively as a coalition of civil society CCM representatives, Global Fund advocates, and global academic and technical partners. This study aimed to identify drivers of community engagement, measure barriers to community oversight, and identify opportunities to strengthen the model.

Reuters - G20 to review multilateral development banks reform roadmap in October, says Brazil

<https://www.reuters.com/world/americas/g20-review-multilateral-development-banks-reform-roadmap-october-says-brazil-2024-04-18/>

“Brazil's presidency of the G20 will submit a roadmap for reforming multilateral development banks for approval by member countries at the finance track meetings scheduled for October, focused on expanding their efficiency and lending capacity.”

“Speaking on the sidelines of the International Monetary Fund and World Bank spring meetings, Haddad invited countries representing the world's 20 largest economies **to continue studying and considering IMF's Special Drawing Rights (SDRs) "as a potential instrument for significantly leveraging the financing capacity of the banks."** The Inter-American Development Bank and the African Development Bank have proposed **channeling SDRs through multilateral development banks (MDBs)**, aiming to leverage the allocated amount by at least four times its original value for new financing to countries in need.....”

TGH (series) - A New Public Health Order For Africa

<https://www.thinkglobalhealth.org/series/new-public-health-order-africa>

This series is **guest-edited by Ebere Okereke**. Ebere Okereke is the **chief executive officer of the Africa Public Health Foundation in Nairobi, Kenya**, and an associate fellow with the global health program of Chatham House, London, UK.

- Check out, among others: TGH - **Rethinking Donor Partnerships in Africa**

“Improving health in Africa requires more effective and respectful collaboration with global partners.” With a **key role for Africa CDC**, obviously.

- TGH - **Global Health and the "Second Independence of Africa"**

“Plans for a new public health order for Africa are central to the continent's future in a geopolitical world.”

- And TGH - [Africa's New Public Health Order and U.S. Global Health Policy](#)

Devex - Spain bucks Europe's aid trend, but journey is just beginning

<https://www.devex.com/news/spain-bucks-europe-s-aid-trend-but-journey-is-just-beginning-107515>

“The director of Spain's development agency wants to boost the country's aid portfolio, while transforming the donor-recipient relationship.”

“As major [European Union](#) donors such as Germany, France, and Denmark pull back on foreign aid, **Spain is trying to buck the trend by setting an ambitious goal to spend 0.7% of gross national income on aid — a dramatic jump from the country's current level of 0.24%. But Antón Leis García, director of Spanish development agency AECID, admits that just getting to 0.4% or 0.5%, a target reached by many of the model countries they've been studying, would be a step in the right direction for Spain.....**”

Also a fan of involving the private sector more, it appears.

Global health financing

Devex - 'Losing our moral compass': Mia Mottley and Amina Mohammed talk debt

<https://www.devex.com/news/losing-our-moral-compass-mia-mottley-and-amina-mohammed-talk-debt-107498>

“With 60% of the world's low-income countries in debt distress or at high risk of it, the two leaders are adamant that something needs to change.”

ORF (paper) - Mapping the Literature on Development Assistance in Health: A Bibliometric Analysis

O Karwa et al; <https://www.orfonline.org/research/mapping-the-literature-on-development-assistance-in-health-a-bibliometric-analysis>

“This paper presents a bibliometric analysis of the literature on private health aid and official health assistance between 2000 and 2022. ... Several crucial findings emerge from the bibliometric analysis: 44.2 percent of the 489 papers/articles assessed focused on lower-middle-income countries, while 37.7 percent focused on low-income countries. However, authors affiliated with institutes and organisations from lower-middle- and low-income countries contributed merely 15.5 percent and 11.8 percent, respectively, of the papers assessed. Most (72.7 percent) were written by authors from high-middle- and high-income countries. Additionally, despite non-

governmental organisations, philanthropies, and private businesses constituting about 20 percent of development assistance donors, a mere 4 percent of all papers focused on these entities.”

UHC & PHC

WHO - Framework for assessing maturity of health accounts institutionalization

<https://www.who.int/publications/i/item/9789240079458>

“This document provides a framework for assessing the maturity of Health Accounts Institutionalization. The framework draws on elements commonly used to assess general governance and institutional assessment, and it is tailored to accommodate the specific features of institutionalizing HA. **The common factors are grouped into four domains:** (1) demand, (2) governance and financing, (3) institutional technical capacity, and (4) dissemination and use of data. A set of questions are proposed for each domain to help the application of the framework and obtain a clear picture to understand the progress and challenges in each country and for cross-country comparisons. **The framework aims to assess where countries are in the process of institutionalization of HA, identify areas that require more effort for advancing or sustaining progress in institutionalization; and enable cross-country learning, targeting mainly policymakers and health accounts teams.”**

Social Protection.org - Social Protection for Health and Wellbeing

L Tessier & N Both; <https://socialprotection.org/discover/blog/social-protection-health-and-wellbeing>

“Universal health coverage (UHC) and universal social protection (USP) are complementary objectives embedded in the 2030 Agenda for Sustainable Development. With only few years left to meet the SDG targets, it is urgent to strengthen those synergies. Health and wellbeing should not be the privilege of a few. Equitable and solidarity-based social protection is central to facilitate financial access to health care services and address the socio-economic inequalities that impact on health outcomes.”

Check out **Key messages**.

- Link: Plos GPH - [Knowledge, attitude, and practices of stakeholders involved in healthcare financing programs on economic evaluations in Cameroon](#)

Pandemic preparedness & response/ Global Health Security

South Centre (Policy Brief) - The WHO Intergovernmental Negotiating Body process and the revised draft of the WHO Pandemic Agreement (A/INB/9R/3)

<https://www.southcentre.int/policy-brief-128-25-april-2024/>

(25 April).

Geneva Graduate Institute's Global Health Centre – The Governing Pandemics initiative - - new Thematic Text Comparison between the REVISED Draft of the Negotiating Text of the @WHO #PandemicAgreement (7 March 2024) & the Proposal for the WHO Pandemic Agreement (April 2024).

A Greenup; <https://repository.graduateinstitute.ch/record/302766?v=pdf>

New text comparison. Check it out.

“The REVISED Draft of the Negotiating Text of the WHO Pandemic Agreement is used as the basis for comparison using a thematic approach, with a consequent review of the relevant provisions in the **Proposal for the WHO Pandemic Agreement. This comparison document includes only the following themes:** preamble, use of terms, objectives & principles, human rights, pandemic prevention and public health surveillance, One Health, preparedness, readiness, and health system resilience, preparedness monitoring & functional reviews, research & development, sustainable and geographically diversified production, and technology transfer and know-how, transfer of technology and know-how for the production of pandemic-related health products, access & benefit sharing, supply chain and logistics & national procurement- and distribution, sustainable financing, Conference of the Parties (COP), reports to the COP, settlement of disputes, and reservations.”

Project Syndicate - The Pandemic Financing Developing Countries Need

R Glennerster; <https://www.project-syndicate.org/commentary/developing-countries-must-be-able-to-invest-at-risk-vaccines-pandemic-by-rachel-glennerster-2024-04?barrier=accesspaylog>

“COVID-19 taught the world that establishing novel financial mechanisms in the midst of a pandemic is practically impossible. That is why multilateral development banks must develop the necessary frameworks now to ensure that low- and middle-income countries can purchase medical countermeasures at-risk, just as developed countries do.”

“... multilateral development banks (MDBs) must establish financing mechanisms to enable at-risk purchases in a pandemic, as well as mechanisms for high-income countries to de-risk these loans. ...When LMICs need to purchase vaccines, therapeutics, and diagnostics at the scale required to fight a pandemic, MDBs are their only realistic source of finance. But current procurement rules prevent purchasing these countermeasures at-risk. The rules must therefore be revised to allow for such purchases, in recognition of the unique challenges of a global health crisis. MDBs can also coordinate with stakeholders to create model procurement contracts and establish indemnity and

liability frameworks to streamline processes and minimize delays. High-income countries can help by guaranteeing these loans in case the vaccine candidates fail. This would reduce the financial risk for LMICs and alleviate politicians' concerns about their potential liability...."

HHR - Three Recommendations on Digital Technologies and Data Privacy for the WHO Pandemic Agreement

Tomaso Falchetta et al; <https://www.hhrjournal.org/2024/04/three-recommendations-on-digital-technologies-and-data-privacy-for-the-who-pandemic-agreement/>

"... Regretfully with each round of negotiations the language around human rights has been weakened and in the [latest draft](#) the **principle on privacy, data protection, and confidentiality** has been deleted. We present here three recommendations for inclusion in the agreement to address the gaps and challenges in pandemic response mechanisms....."

Science News - U.S. government in hot seat for response to growing cow flu outbreak

<https://www.science.org/content/article/u-s-government-hot-seat-response-growing-cow-flu-outbreak>

"Veterinarians and researchers on the front lines say it **has taken too long to share data on viral changes, spread, and milk safety.**"

- Related: Science - [The U.S. government is taking action to stop 'cow flu.' Is it too little, too late?](#)

"Genetic evidence suggests cattle infections with H5N1 began in the fall of 2023 and may occur far more widely than has been reported."

Stat - Genetic analysis reveals H5N1 flu virus outbreak in cows likely started earlier than thought

<https://www.statnews.com/2024/04/23/h5n1-bird-flu-genetic-analysis/>

"The H5N1 bird flu outbreak in dairy cows in the United States has likely been going on for months **longer than was previously realized**, and has probably spread more widely across the country than the confirmed outbreaks would imply, **according to an analysis of [genetic sequences that were released](#) Sunday by the U.S. Department of Agriculture.**"

"The **genetic data point to a single spillover event that probably occurred in late 2023**, Michael Worobey, an evolutionary virologist at the University of Arizona, told STAT on Tuesday....."

Stat - Massive amounts of H5N1 vaccine would be needed if there's a bird flu pandemic. Can we make enough?

<https://www.statnews.com/2024/04/24/h5n1-bird-flu-vaccine-preparedness/>

Recommended read. **"Vaccine capacity would be far from adequate to protect a large share of the world's population in the first year of a H5N1 bird flu pandemic."**

"... The good news: The world makes a lot of flu vaccine and has been doing it for decades. Regulatory agencies have well-oiled systems to allow manufacturers to update the viruses the vaccines target without having to seek new licenses. The United States even has some H5 vaccine in a stockpile that it believes would offer protection against the version of the H5N1 virus infecting dairy cattle, though there would not be nearly enough doses for the entire country. **The bad news:** The current global production capacity isn't close to adequate to vaccinate a large portion of the world's population in the first year of a pandemic. And batches of flu vaccine, often (though not always) produced in hen's eggs, take months to produce."

"... Experts STAT interviewed suggested that in some respects, the world is better positioned to produce pandemic flu vaccines, if the need arises. But a number warned that assuming the successes of Covid vaccine production would automatically influence the speed and scale of pandemic flu vaccine production would be unwise. "You just have a different [production] system for flu vaccines than we developed on the fly for Covid," said Richard Hatchett, CEO of the Coalition for Epidemic Preparedness Innovations, better known as CEPI, an international organization tasked with spurring development of medical countermeasures for diseases that can cause epidemics and pandemics. "And the ... system that we developed for Covid can't just be repurposed for flu." **Let's explore some of the ways the world is perhaps better prepared than it was in the past, and some of the snarls that could slow efforts to protect against a dangerous pandemic."**

Lancet Infectious Diseases (Editorial) - What is the pandemic potential of avian influenza A(H5N1)?

[https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(24\)00238-X/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(24)00238-X/fulltext)

Concluding: **"... the threat of a pandemic remains high, and we urge international leaders to reach an agreement on a pandemic accord before it is too late."**

Science News - Forced to eat bat feces, chimps could spread deadly viruses to humans

<https://www.science.org/content/article/forced-eat-bat-feces-chimps-could-spread-deadly-viruses-humans>

"Tobacco farming is driving apes to seek unusual food source, brimming with pathogens."

Lancet Infectious Diseases - Social histories of public health misinformation and infodemics: case studies of four pandemics

S L Jin et al ; [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(24\)00105-1/abstract](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(24)00105-1/abstract)

“We conducted a narrative review of secondary historical sources **to examine previous infodemics in relation to four infectious diseases associated with pandemics (ie, smallpox, cholera, 1918 influenza, and HIV) and challenge the assumption that misinformation is a new phenomenon associated with increased use of social media or with the COVID-19 pandemic.** On the contrary, we found that the spread of health misinformation has always been a public health challenge that has necessitated innovative solutions from medical and public health communities.....”

Planetary health

FT - Exxon leads industry fight against UN plans to limit plastic

<https://www.ft.com/content/c02b3f33-fcc0-4aab-be6f-8702443a3622>

“Petrochemical companies oppose global agreement that would cut production to curb pollution. **Exxon is leading a petrochemical industry fight against UN plans to limit plastic,** claiming any move to cap production would increase greenhouse gas emissions .”

“... **More than 4,000 country delegates and observers will gather in Ottawa, Canada on April 23 in the penultimate round of UN negotiations to broker a deal** likened to the 2015 Paris climate agreement for plastics. **Disagreements over how the 400mn tonnes of annual plastic waste should be managed have stalled negotiations.....”**

Geneva Solutions - Workers face rising threat from climate change, ILO warns

<https://genevasolutions.news/climate-environment/workers-face-rising-threat-from-climate-change-ilo-warns>

“**The UN labour agency has published a report on the toll climate change is taking on billions of workers,** a year after its congress was presided over by Qatar, which has been accused of heat-related worker abuse.”

“**The [report](#) found more than 2.4 billion workers employed indoors and outdoors, or 70 per cent of the global working population, are exposed every year to extreme heat,** according to the most recent figures available (2020). **That’s a 35 per cent increase from 20 years before or nearly nine per cent when considering population growth.** Approximately 23 million people suffer occupational injuries, while hundreds of thousands die annually from sun exposure, pollution and the rise of vector-borne diseases due to climate change....”

“....**The report focused on how six issues relating to climate change – excessive heat, ultraviolet radiation, extreme weather events, workplace air pollution, vector-borne diseases and agrochemicals on the rise due to weather changes – are specifically affecting workers** in various sectors and what responses countries have in place to mitigate the risks.”

HPW - Asia Is Warming Faster Than the Global Average, Warns WMO

<https://healthpolicy-watch.news/asia-is-warming-faster-than-the-global-average-warns-wmo/>

“The warming trend in Asia has nearly doubled over the last three decades, the UN’s meteorological agency reports. In its [State of the Climate in Asia 2023](#), the WMO shows how this has happened largely in the north in places like Siberia, China and Japan.”

Guardian - Estuaries, the ‘nurseries of the sea’, are disappearing fast

<https://www.theguardian.com/science/2024/apr/24/estuaries-the-nurseries-of-the-sea-are-disappearing-fast>

“Study reveals repurposing of ecologically vital land for homes or agriculture is happening particularly rapidly in Asia.”

“Estuaries – the place where a river meets the ocean – are often called the “nurseries of the sea”. They are home to many of the fish we eat and support vast numbers of birds, while the surrounding salt marsh helps to stabilise shorelines and absorb floods. However, a new study shows that nearly half of the world’s estuaries have been altered by humans, and 20% of this estuary loss has occurred in the past 35 years.”

“Using satellite data, researchers measured the changes that had occurred at 2,396 estuaries between 1984 and 2019. The results, published in the journal [Earth’s Future](#), found that over the past 35 years more than 100,000 hectares (250,000 acres) of estuary have been converted into urban or agricultural land, with the majority of the loss (90%) having occurred in rapidly developing Asian countries. By contrast, very little estuary loss has occurred in high-income countries during the past 35 years – mostly because extensive estuary alteration happened many decades before, during those countries’ own phase of rapid development.”

UN News - UN chief calls for all hands on deck at Climate Promise 2025 launch

<https://news.un.org/en/story/2024/04/1148921>

“Top UN officials launched a fresh global campaign to tackle the climate emergency on Tuesday, with social media influencers, Indigenous leaders and corporate giants showing what they’ve done and what’s to come.” It’s called **The Climate Promise 2025.**

Telegraph - Dust storms are becoming ‘more frequent and severe’ – so are we prepared?

<https://www.telegraph.co.uk/global-health/climate-and-people/dust-storms-sand-sahara-athens-greece-pollution/>

“As haze from the Sahara envelops Athens, scientists are racing to explain a worrying global trend.”

Guardian - Survey finds that 60 firms are responsible for half of world's plastic pollution

<https://www.theguardian.com/environment/2024/apr/24/survey-finds-that-60-firms-are-responsible-for-half-of-worlds-plastic-pollution>

“Study confirms Philip Morris International, Danone, Nestlé, PepsiCo and Coca-Cola are worst offenders.”

“Fewer than 60 multinationals are responsible for more than half of the world's plastic pollution, with five responsible for a quarter of that, based on the findings of a piece of [research published on Wednesday](#). The researchers concluded that for every percentage increase in plastic produced, there was an equivalent increase in plastic pollution in the environment. “Production really is pollution,” says one of the study's authors, [Lisa Erdle](#), director of science at the **non-profit The 5 Gyres Institute**.”

Nature Medicine (Comment) -Climate change and health: understanding mechanisms will inform mitigation and prevention strategies

<https://www.nature.com/articles/s41591-024-02925-8>

“The cellular and molecular mechanisms underlying the health impacts of climate change must be better understood in order to plan interventions that mitigate harm.”

Covid

AP -Toxic: How the search for the origins of COVID-19 turned politically poisonous

<https://apnews.com/article/china-covid-virus-origins-pandemic-lab-leak-bed5ab50dca8e318ab00f60b5911da0c>

Investigative report. Well worth a read.

“The hunt for the origins of COVID-19 has gone dark in China, the victim of political infighting after a series of stalled and thwarted attempts to find the source of the virus that killed millions and paralyzed the world for months.”

“The Chinese government froze meaningful domestic and international efforts to trace the virus from the first weeks of the outbreak, despite statements supporting open scientific inquiry, an Associated Press investigation found. That pattern continues to this day, with labs closed, collaborations shattered, foreign scientists forced out and Chinese researchers barred from leaving the country. The investigation drew on thousands of pages of undisclosed emails and documents and dozens of interviews that **showed the freeze began far earlier than previously known and involved political and scientific infighting in China as much as international finger-pointing....”**

Mpox

Cidrap News - Data: Mpox rates steady year-round in Africa, vary by season in Northern Hemisphere tropics

<https://www.cidrap.umn.edu/mpox/data-mpox-rates-steady-year-round-africa-vary-season-northern-hemisphere-tropics>

“From 1970 to 2021, mpox cases were detected year-round in equatorial Africa but were detected seasonally in tropical regions in the Northern Hemisphere, finds an analysis of 133 zoonotic index cases led by Institut Pasteur researchers in Paris. Published in *Emerging Infectious Diseases*, the study was based on peer-reviewed and "gray" (alternatively published) literature on index mpox cases of zoonotic origin in Africa over the 50-year timeframe.....”

Infectious diseases & NTDs

Devex - How Rwanda is fighting malaria in a lab

<https://www.devex.com/news/how-rwanda-is-fighting-malaria-in-a-lab-107536>

“Rwanda’s entomology lab plays a critical role in the country’s malaria control efforts, including in addressing malaria parasite resistance and the potential spread of the disease due to climate change.”

AMR

FT - EU approves new antibiotic to tackle rise of superbugs

<https://www.ft.com/content/27618d67-64f1-4aa4-99ae-c999b5686031>

“Pfizer’s Emblaveo to be aimed at some of the most dangerous drug-resistant bacteria.”

“ The EU has approved a new antibiotic for serious illnesses such as pneumonia and urinary tract infections, marking a step forward in the drive to combat the growing resistance of “superbugs” to existing drugs. Emblaveo, marketed in Europe by US pharmaceutical company Pfizer, combines two existing medicines to tackle so-called Gram-negative bacteria that are among the leading drug-resistance threats. The European Commission is the first authority to approve the treatment, which is likely to be used in a relatively narrow group of serious cases to reduce the risk it will trigger a surge in anti-microbial resistance (AMR).;...”

“... Emblaveo is a “really interesting combination” to combat drug resistance but there is “scope for improvement” in its antibacterial action, said Chris Schofield, an Oxford university professor and head of chemistry at the Ineos Oxford Institute for antimicrobial research. He added that Emblaveo’s pricing “will be a key question since some of the resistant bacteria it targets are most prevalent in low- and middle-income countries””

NCDs

Imperial College - Taxing unhealthy food helps cut obesity, says global study

<https://www.imperial.ac.uk/news/252678/taxing-unhealthy-food-helps-obesity-says/>

“Mexico is leading the way in implementing taxes on unhealthy food options, successfully helping to tackle obesity and related health issues.”

“Taxes on foods that are high in fat, salt or sugar (HFSS) reduce the sale, purchase and consumption of those foods, according to a [new peer-reviewed analysis of evidence from around the world](#) from [Imperial College Business School](#). This can lead to lower rates of obesity and other diet-related health problems, especially when taxes are combined with subsidies for healthier foods. The review also notes that **higher rates of tax are more likely to reduce HFSS food consumption and obesity, and the response is most pronounced among lower-income groups.**”

“**The review explores findings from 20 studies worldwide**, in countries including Mexico, the United States, Canada, Hungary, Denmark, the Netherlands, Singapore and New Zealand, highlighting the global potential of taxes on HFSS foods. **To date, only 16 countries have implemented taxes on HFSS foods**, and the review incorporates some of these, alongside experimental studies.....”

FT - England has highest rates of child alcohol consumption, international study finds

[England has highest rates of child alcohol consumption, international study finds \(ft.com\)](#)

“Global health experts call for curbs on online marketing to protect teens from marketing of ‘harmful products’.”

Based on a **WHO study of more than 40 countries**. “... The study analysed data from 2021-22 relating to cigarette smoking, vaping and alcohol consumption in about 280,000 school-age children **across 44 countries in Europe, central Asia and Canada.....**”

Nature (Editorial) - Any plan to make smoking obsolete is the right step

<https://www.nature.com/articles/d41586-024-01176-4>

“The United Kingdom is correct to attempt to end the single largest preventable cause of illness and death, as was New Zealand before its government changed its mind.”

Social & commercial determinants of health

Globalization & Health (Debate) - Brief interventions 2.0: a new agenda for alcohol policy, practice and research

Duncan Stewart et al; <https://globalizationandhealth.biomedcentral.com/articles/10.1186/s12992-024-01031-1>

“Alcohol problems are increasing across the world and becoming more complex. Limitations to international evidence and practice mean that **the screening and brief intervention paradigm forged in the 1980s is no longer fit for the purpose of informing how conversations about alcohol should take place** in healthcare and other services. **A new paradigm for brief interventions has been called for.**”

“.... **To progress, brief interventions should not be restricted only to the self-regulation of one’s own drinking.** Content can be orientated to the properties of the drug itself and the overlooked problems it causes, the policy issues and the politics of a powerful globalised industry. This entails challenging and reframing stigmatising notions of alcohol problems, and incorporating wider alcohol policy measures and issues that are relevant to how people think about their own and others’ drinking. We draw on recent empirical work to examine the implications of this agenda for practitioners and for changing the public conversation on alcohol....”

National Academies - Community Safety as a Social Determinant of Health: Proceedings of a Workshop-in Brief (2024)

<https://nap.nationalacademies.org/catalog/27741/community-safety-as-a-social-determinant-of-health-proceedings-of>

“**The National Academies Roundtable on Population Health Improvement and the Forum on Mental Health and Substance Use Disorders held a public workshop in December 2023 to explore various dimensions of community safety and violence prevention in the U.S.** Speakers highlighted attributes of physical spaces and social structures that create and reinforce safer communities. Discussions also covered identity-based violence, threats to interpersonal safety, frameworks for reimagining safety, and related policy and program solutions.”

Sexual & Reproductive health rights

ODI - Feminist responses to ‘norm-spoiling’ at the United Nations

<https://odi.org/en/publications/feminist-responses-to-norm-spoiling-united-nations/>

“**Threats to progress on gender equality, LGBTQI+ diversity and women’s rights are gaining traction.** Across the world and in global, national and local spaces, anti-rights actors are working collectively to undermine and restrict the rights of women and LGBTQI+ people. **‘Norm-spoiling’ refers to an agenda that seeks to undermine the legitimacy of gender equality and women’s rights norms.** Such activities are sustained by an increasingly professionalised network of actors

disseminating anti-rights narratives within UN systems and working to change human rights discourse.”

“This ODI Briefing note explores the what, who and how of 'norm-spoiling', as well as the successful counter-strategies being employed by feminist organisations to resist these efforts. It outlines what is known about the well-coordinated tactics eroding rights-based norms at the international level, and what can be done protect women's and LGBTQ+ rights, which have been hard-won through decades of feminist organising.”

Devex - Climate crisis and food insecurity are driving anemia in India

<https://www.devex.com/news/climate-crisis-and-food-insecurity-are-driving-anemia-in-india-107278>

“Climate change threatens India's 378 million women of childbearing age with anemia due to rising temperatures and declining crop nutrients.”

And a link:

- **Plos GPH - [Infection-related severe maternal outcomes and case fatality rates in 43 low and middle-income countries across the WHO regions: Results from the Global Maternal Sepsis Study \(GLOSS\)](#)**

Neonatal and child health

Lancet GH - Estimated global and regional causes of deaths from diarrhoea in children younger than 5 years during 2000–21: a systematic review and Bayesian multinomial analysis

[https://www.thelancet.com/journals/langlo/article/PIIS2214-109X\(24\)00078-0/fulltext](https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(24)00078-0/fulltext)

Related Comment: [Understanding deaths from diarrhoea in children younger than 5 years](#)

Access to medicines & health technology

Stat Plus – Novo Nordisk’s move to discontinue an insulin leaves patients to ‘pick up the pieces’

[Stat](#) ;

(gated) « **Discontinued insulin leaves patients to ‘pick up the pieces’.**”

“A year ago, Novo Nordisk announced that it would cut the price of multiple insulin products by up to 75%. The move was largely counted as a win for diabetes patients, but several months

later, the company decided to discontinue one of those products, the basal insulin Levemir. In a statement, Novo said “significant insurance formulary losses” contributed to its decision to discontinue the drug. **Though it won’t officially be off the market until the end of this year, patients are already running into supply disruptions and insurance cutoffs,** STAT’s Elaine Chen reports.....”

Reuters - China's drugmakers can't sell mRNA shots but haven't quit yet

[Reuters](#);

“China's vaccine developers stuck with unused mRNA COVID shots and idle manufacturing plants are pursuing new targets for the novel messenger RNA technology, but they face a tough path, crimped by a lack of revenue. Three Chinese companies - Walvax Biotechnology ([300142.SZ](#)), [opens new tab](#), CSPC Pharmaceutical Group ([1093.HK](#)), [opens new tab](#) and Stemirna Therapeutics - came up with mRNA vaccines that **won limited emergency approvals in Asia.....**”

Geneva Solutions - A new multilateral treaty takes root at WIPO to recognise traditional knowledge

<https://genevasolutions.news/science-tech/a-new-multilateral-treaty-takes-root-at-wipo-to-recognise-traditional-knowledge>

“In Geneva, a multilateral treaty is taking shape. If **agreed upon, it would be the first time the intellectual property sector crafts a deal around the concerns of biodiverse-rich developing countries and Indigenous peoples....**”

“....Around 1,200 negotiators, lawyers, Indigenous representatives and civil society groups will **gather at the UN body’s headquarters in Geneva from 13 to 23 May to finalise the so-called instrument on intellectual property, genetic resources and associated traditional knowledge.** Under the **proposed agreement, likely to take the form of a treaty,** disclosing information about the origin of the genetic resources and whether the invention relied on traditional knowledge would become a legal requirement for anyone filing a new patent application.

And a link:

- Lancet World Report - [Moderna stalls on African vaccine manufacturing plans](#)

“Moderna's decision has been criticised by the Africa CDC, with **experts urging countries to invest domestically.** Paul Adepoju reports.”

Human resources for health

Africa News - Kenya: Doctors begin fifth week of strike

<https://www.africanews.com/2024/04/17/kenya-doctors-begin-fifth-week-of-strike/>

Related **tweet ONE**: “ Hundreds of Kenyan doctors are on strike for better pay. Many patients are left without vital care. **This is the real toll of the debt crisis - and the tragedy that African countries spend more on debt repayments than health care.** #WBGMeetings.”

Decolonize Global Health

Devex op-ed - We need to stop telling the global south what to do

Melissa Leach; <https://www.devex.com/news/opinion-we-need-to-stop-telling-the-global-south-what-to-do-107530>

“Effective development must overcome outdated colonial thinking and **reach for more humble and reflective attitudes**, acknowledging power relations past and present.”

Miami Institute for the Social Sciences - Grounding the Decolonisation of Global Health within Decolonial Theory

S Mukherjee; <https://www.miamisocialsciences.org/home/su4ojp6x2azfd2o3ygxi85q5lhlbag>

Continuing the Miami Institute forum on “What does it mean to decolonize global public health?,” Sujata Mukherjee responds to David McCoy’s essay, “An Anti-Colonial Agenda for the Decolonisation of Global Health” (October 2023), the essay that launched this forum. In her response, Mukherjee stresses the importance of grounding the decolonization of global health within decolonial theory”

Miscellaneous

Guardian - Sudan had largest number of people facing extreme food shortages in 2023, UN report shows

<https://www.theguardian.com/world/2024/apr/24/sudan-extreme-food-shortages-2023-food-insecurity>

“The African country accounted for two-thirds of the additional 13.5m people needing urgent help as displacement drove food insecurity globally.”

“Globally, more than 281 million people in 59 countries faced high levels of acute food insecurity according to the [Global Report on Food Crises](#), published today, with economic crises and extreme weather also contributing.....”

- See also Devex - [Global hunger levels 'bleak' amid spikes due to wars in Gaza and Sudan](#)

“ **Climate shocks and economic crises are additional reasons** behind the increase in hunger numbers to 282 million people in 59 countries and territories.”

Geneva Solutions - A new group of experts wants to fix our broken food system

<https://genevasolutions.news/global-news/a-new-group-of-experts-wants-to-fix-our-broken-food-system>

“Between millions of people going to bed hungry every day and growing pressure on the planet from resource-intensive food production and consumption, **the global food governance system is failing to live up to the task. A group of experts that met in Geneva this week is trying to find a better way.** If you could rewind the tape to 1945 and the early years of our modern multilateral system, **how would you build the global food governance architecture so that no one ever goes hungry?** That’s the question a **group of experts set up by the Kofi Annan Foundation will grapple with for the next six months.**”

“**The Food Security Commission and its eight prominent figures** including former Ethiopian prime minister Hailemariam Dessalegn Bosheormer, ex-chief scientist at the World Health Organization Soumya Swaminathan, president of the Alliance for a Green Revolution in Africa Agnes Kalibata and David Nabarro, former co-lead of the UN Global Crisis Response Group on food-energy-finance, have **the ambitious task of figuring out what’s wrong with a system that is largely failing millions of people who are lacking sufficient and nutritious meals day after day.....**”

“....**The one-year project, announced in December with around \$1 million in funding from the Rockefeller Foundation, aims to produce a report to be ready by the UN General Assembly in September.** The blueprint will contain recommendations for governments and other key actors on how to deliver the SDG 2 promise of ridding the world of hunger by 2030 – though convincing them to implement them will be a challenge in itself.....”

UN News - UNESCO report spotlights harmful effects of social media on young girls

<https://news.un.org/en/story/2024/04/1149021>

“Digital technologies and algorithm-driven software - especially social media - present high risks of privacy invasion, cyberbullying and distraction from learning to young girls, according to the **UN Educational, Scientific and Cultural Organization’s (UNESCO) latest Global Education Monitor (GEM) report** released on Thursday.....”

Guardian - Most difficult global outlook since 1930s heralds end of US-led world order

L Elliott; <https://www.theguardian.com/business/2024/apr/21/most-difficult-global-outlook-for-a-century-heralds-end-of-us-led-world-order-imf>

More analysis of the Spring Meetings. “IMF has revised up growth forecasts but medium-term prospects remain poor as **globalisation goes into reverse.**”

“..... In truth, not a lot happened in Washington last week. There was the usual flurry of reports but not much else. **Beneath the surface, however, something much more important is going on, and that is the breakup of the US-dominated form of globalisation.** The model involved western companies outsourcing manufacturing to China and other low-cost destinations, and for a while it delivered cheap goods, which kept inflation low and made life easy for central banks. Those days are now over. The US and Europe want to protect jobs by limiting imports of Chinese goods and subsidising their own manufacturing sectors. Only last week, Joe Biden called for a tripling of tariffs on Chinese steel in a move designed to appeal to blue-collar workers in swing states. **This is not the first time this has happened. The pre-first world war era of globalisation fell apart as a result of war, a pandemic, inflation and protectionism. Little by little, history is repeating itself.**”

- And via Devex: [Philosophy of giving](#)

“From that to this: **As the flagship conference of the Asian Venture Philanthropy Network — Asia's largest network of social investors — opened in Abu Dhabi, United Arab Emirates**, yesterday, one of the conference hosts challenged participants to **look at philanthropy in a new way — the way they see it in the UAE**. Philanthropy should never be reduced to giving money, helping others, or fixing situations, said Shamma bint Sohail Faris Al Mazrui, the country's minister of community development. Instead, **philanthropy should be seen as acts of service — service that helps the giver as much as the recipient...** When philanthropy is used as a public relations move, the minister said, it takes the “magic out of the equation.” ... ““Helping is based on inequality — it's not a relationship between equals. When you help, you use your own strength to help those of a lesser strength. People feel this inequality,” she said. “When you give to someone, they owe you. But **serving is mutual. There is no debt. I am as served as the person I'm serving.**”

Papers & reports

HP&P - Unfair knowledge practices in global health: a realist synthesis

Seye Abimbola et al; <https://academic.oup.com/heapol/advance-article/doi/10.1093/heapol/czae030/7655451?searchresult=1>

“**Unfair knowledge practices** easily beset our efforts to achieve health equity within and between countries. Enacted by people from a distance and from a position of power (‘the centre’) on behalf of and alongside people with less power (‘the periphery’), these unfair practices have generated a complex literature of complaints across various axes of inequity.....” “We framed **the outcome to be explained** as ‘manifestations of unfair knowledge practices’; **their generative mechanisms** as ‘the reasoning of individuals or rationale of institutions’; and **context that enable them** as ‘conditions that give knowledge practices their structure’. **We identified four categories of unfair knowledge practices, each triggered by three mechanisms**: 1. credibility deficit related to pose (mechanisms: ‘the periphery’s cultural knowledge, technical knowledge, and ‘articulation’ of knowledge do not matter’); 2. credibility deficit related to gaze (mechanisms: ‘the centre’s learning needs, knowledge platforms, and scholarly standards must drive collective knowledge-making’); 3. interpretive marginalisation related to pose (mechanisms: ‘the periphery’s sensemaking of partnerships, problems, and social reality do not matter’); and 4. interpretive marginalisation related to gaze (mechanisms: ‘the centre’s learning needs, social sensitivities and status-preservation must drive collective sensemaking’). **Together, six mutually overlapping, reinforcing and dependent categories of context influence all 12 mechanisms**: *mislabelling* (the periphery as inferior); *miseducation* (on structural origins of disadvantage); *under-representation* (of the periphery on knowledge platforms); *compounded spoils* (enjoyed by the centre); *under-governance* (in making, changing, monitoring, enforcing, and applying rules for fair engagement); and *colonial mentality* (of/at the periphery)...”

European Observatory on Health Systems & Policies (Book) - Strengthening Health Systems: A Practical Handbook for Resilience Testing

J Zimmerman et al; <https://eurohealthobservatory.who.int/publications/i/strengthening-health-systems-a-practical-handbook-for-resilience-testing>

“At its core, **the handbook describes a pioneering resilience testing methodology** — a structured, collaborative approach inspired by stress tests used in other sectors, scenario planning and health system performance evaluations.”

“**Strengthening Health Systems: A Practical Handbook for Resilience Testing is organized into three distinct sections** and serves as a comprehensive companion: Section 1 is a hands-on guide, explaining each step of the resilience testing process. Section 2 gives an outline of the foundational concepts driving resilience testing. Section 3 is a carefully curated collection of example shock scenarios that can be adapted for use in diverse country contexts.”

European Observatory on Health Systems & Policies (Book) - Health for All Policies The Co-Benefits of Intersectoral Action

Scott L. Greer et al; [https://eurohealthobservatory.who.int/docs/librariesprovider3/studies---external/9781009467735ar-\(1\).pdf](https://eurohealthobservatory.who.int/docs/librariesprovider3/studies---external/9781009467735ar-(1).pdf)

“Factors outside of healthcare services determine our health and this involves many different sectors. **Health for All Policies changes the argument about inter-sectoral action, from one focusing on health and the health sector to one based on co-benefits – a ‘Health for All Policies’ approach.** It uses the Sustainable Development Goals as the framework for identifying goals across sectors and summarizes evidence along two causal axes. One is the impact of improved health status on other SDGs, e.g. better educational and employment results. The other is the impact of health systems and policies on other sectors. **The ‘Health for All Policies’ approach advocated in this book is thus a call to improve health to achieve goals beyond health and for the health sector itself to do better in understanding and directing its impact on the world beyond the healthcare it provides.**”

BMJ GH - The need for global social epidemiology in the polycrisis era

D Rasella et al ; <https://gh.bmj.com/content/9/4/e015320>

“**Call for global social epidemiology (GSE):** there is a need for a renewal in social epidemiology to address the challenges of the polycrisis era. GSE prioritises interventions that mitigate crisis impacts, focuses on global relations between countries, particularly in low-income and middle-income countries, and promotes a decolonised approach....”

PS: “**An initiative to catalyse the field of GSE has been the recent creation of the Global Social Epidemiology Network:** an alliance of international and multidisciplinary researchers committed to tackling the global structural determinants of health and health inequities through a GSE approach....”

BMJ GH (Editorial) - Community engagement and the centrality of ‘working relationships’ in health research

R Vincent, S Mollyneux et al ; <https://gh.bmj.com/content/9/4/e015350>

Authors conducted a realist review—a theory-driven approach to evidence synthesis—to better understand the causal dynamics of Community Engagement (CE) practices associated with health

research in LMICs. We selected **large malaria trials** as the **entry point for the review** because there is a well-established tradition of CE in malaria research, and because this area provides a good representation of current CE practice in international biomedical research involving LMICs. **In this commentary, we summarise and discuss the key findings and implications of the review.**"

Lancet Public Health (Health Policy) – Beyond misinformation: developing a public health prevention framework for managing information ecosystems

[https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(24\)00031-8/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(24)00031-8/fulltext)

By A Ishizumi et al.

PS: this week's Lancet issue also has **a few letters related to the Lancet Commission on peaceful societies through health equity and gender equality.** ([here](#) and [here](#))

Blogs of the week

K Bertram - Dehumanizing people and population groups: Viral anti-women campaigns and the role of the far-right

<https://katribertram.wordpress.com/2024/04/25/dehumanizing-people-and-population-groups-viral-anti-women-campaigns-and-the-role-of-the-far-right/>

"Dehumanization narratives and campaigns are on the rise. We need to act – publicly and politically. The current focus on banning TikTok is insufficient."

Tweets (via X & Bluesky)

Dr Tedros

"@WHO's partnership with the @WorldBank is going from strength to strength: together we have just established the Universal Health Coverage Knowledge Hub with #Japan, in addition to our shared work on the @Pandemic_Fund, the G20 Joint Finance and Health Task Force, and @TheGPMB. President Ajay Banga and I discussed today how to accelerate progress towards universal health coverage through International Development Assistance and WHO's investment round; as well as local production of vaccines, medicines and tests in Africa. We're deeply grateful for the Bank's strong commitment to #HealthForAll. Together! #WBGMeetings"

G Zucman

"Back from the IMF/World Bank Spring meetings, where — six weeks after the beginning of the work at the G20 on a coordinated taxation of the super-rich — there was palpable "tax the rich" energy in the room A few notable developments:"

Helen Clark

“#PandemicAccord negotiations were timetabled to deliver a text for decision to World Health Assembly at end May. **Options appear to have narrowed to framework-style agreement with process to address outstanding issues, or no agreement.** @washingtonpost”

Jonathan Patz

“Legendary global health leader @IlonaKickbusch opening plenary #WHSMelbourne2024 loss of trust as a serious health threat itself. Also flagged #planetaryhealth essential- reminder today is #earthday2024.”

Dr Tedros

“Around 3 million people die every year due to unsafe care. @WHO is now finalizing the first **Global #PatientSafety Report** that will provide a comprehensive overview of patient safety achievements in countries. The **theme for #WorldPatientSafetyDay 2024**: 'Improving diagnosis for patient safety' with the slogan 'Get it right, make it safe!'”

Tulio de Oliveira

“So South Africa and Africa share in real-time COVID-19 variant data but the USA does not for a Flu strain H5N1 of pandemic potential? Amazing how incompetent the USA scientists are or maybe 'hiding' information?”

Eric Topol

“This isn't good, folks. I'm not worried about H5N1 transmission to humans (yet) but the @USDA pathetic lack of transparency, how long it took for the genomes to be released, lack of testing asymptomatic cattle..... All detracts from "confidence".”

Pete Baker

“@AfricaCDC is this week launching its Continental Framework on Strengthening Priority Setting. A privilege to have been an advisor over the last 4 years. @just_nonvignon @JeanKaseya2 have developed @AfricaCDC into an inspiring champion of efficient high impact health systems.”

Africa CDC

“Africa CDC is convening a 3-day consultation workshop with @_AfricanUnion Member States to validate and launch the Africa CDC Continental Framework for Evidence-Informed Priority Setting & Resource Optimization for PHEPR in . #NewPublicHealthOrder.”

Fifa Rahman

“300 bodies found in the mass graves near Nasser Hospital. Some in scrubs, and in handcuffs. There should be outrage. Arms embargo on Israel and an end to the occupation. No more global health conferences in genocide-supporting countries until these are achieved.”

Ngozi Okonjo-Iweala

“Celebrating the 30th Anniversary of the TRIPS (Trade Related Aspects of Intellectual Property) agreement as part of the 30th anniversary celebration of WTO and 80th anniversary of GATT. “

Podcasts & webinars

HPW - ‘The Best Way To Save Orangutans Could Actually Be To Save People’

<https://healthpolicy-watch.news/the-best-way-to-save-orangutans-could-actually-be-to-save-people/>

“Planet well-being and human health are interconnected issues – one cannot be achieved without the other, according to [Kinari Webb](#), an American medical doctor, public health innovator and thought leader interviewed on the [most recent episode](#) of the [Global Health Matters](#) podcast.

During the special “Dialogues” episode, Webb speaks with host [Dr. Garry Aslanyan](#) about her **experiences in the rainforests that led her to establish the non-profit organisation Health in Harmony** and write the book “[Guardians of the Trees](#).” Webb and her team have **developed a model that provides health care as an incentive to protect the environment.....”**